



STATE UNIVERSITY OF NEW YORK

REGISTRAR'S OFFICE

DATE OF BIRTH / SOCIAL SECURITY NUMBER UPDATE

Note: Employees must change this information at Human Resources.

NAME _____

SBID# _____

Which of the following are you updating?

Social Security Number – Please provide signed SS Card.

(Old Number in System - if any)

(New Number)

Date of Birth – Please provide Birth Certificate, Drivers License or Permit.

(Date of Birth in System)

(New Date of Birth)

Student Signature

Date

**Submit to: Registrar's Office – 276 Administration Building
Phone: (631) 632-6175, Option #1; Fax: (631) 632-9491**

OFFICE USE ONLY

ID Provided:

- Signed Social Security Card
- Birth Certificate
- Drivers License/Permit

Stamp Date Received:	
Staff Initial	Date