



# Student Personal Data Update Form

Office of the Registrar / 200 West Kawili St. Hilo, HI 96720-4091 / Student Services Center, First Floor Rm E-101 / Phone: (808) 932-7447 / Fax: (808) 932-7448 / E-mail: [uhhro@hawaii.edu](mailto:uhhro@hawaii.edu)

- Complete this form to update the following student personal data:
  - Social Security Number Change
  - Phone Number Change
  - New Permanent Address (Mailing address can be changed via MyUH)
  - New Physical Address (Address where you are physically living. Can be different from your mailing address.)
  - Address After Graduation (Must have submitted and paid for a Graduation Application)

## SECTION I: Student Information

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Email Address: \_\_\_\_\_ @hawaii.edu Phone: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## SECTION II: Changes/updates to student personal data

I AM REQUESTING TO CHANGE MY SOCIAL SECURITY NUMBER

Former Number: \_\_\_\_\_ New Number: \_\_\_\_\_

I AM REQUESTING TO CHANGE MY PHONE NUMBER

Phone: \_\_\_\_\_

I AM REQUESTING TO CHANGE MY PERMANENT ADDRESS (not applicable to WUE students)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Country: \_\_\_\_\_ Zip Code: \_\_\_\_\_

I AM REQUESTING TO CHANGE MY PHYSICAL ADDRESS (not applicable to P.O. Box addresses)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Country: \_\_\_\_\_ Zip Code: \_\_\_\_\_

I AM REQUESTING TO CHANGE MY ADDRESS AFTER GRADUATION

I have applied to graduate in (Semester & Year): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Country: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## FOR OFFICE OF THE REGISTRAR USE ONLY:

SPAPERS     SPAIDEN     SHADGMQ     EMAIL SENT    Date: \_\_\_\_\_    Initial: \_\_\_\_\_