

### Update Contact Information

#### **Change of Name, Address, Email, or Phone Number**

Updating your preferred first name is **not** a legal name change.  
Questions regarding data collected may be directed to the Registrar. (HB 1922)

Student ID OR Social Security Number		Date of Birth	<p align="center"><b>Program</b></p> <input type="checkbox"/> Texas College of Osteopathic Medicine <input type="checkbox"/> School of Biomedical Sciences <input type="checkbox"/> School of Public Health <input type="checkbox"/> School of Health Professions(DPT, MSLS, PA) System College of Pharmacy
Last Name	First Name	Middle Name	
Email Address		Daytime Telephone Number	
Other Names Used While Enrolled at HSC		Graduating Year	

### Update Contact Information

- Change my mailing address to:     
 Update my phone number to:     
 Update my preferred first name to:
- Change my permanent address to:     
First:
- Update my personal email address to:

### Change of Name

To make an official name change, the **student must provide identification and legal documentation of the change**. An example might include a marriage license or divorce decree. Registrar's Office personnel must make a copy of the original documentation before completing the change. **Before submitting your name change to our office, please change your name with the Social Security Administration.**

New Name:

First Name	Middle Name	Last Name	Suffix
------------	-------------	-----------	--------

- Attached is a copy of my identification.  
(Example: driver's license, passport, etc.)
- AND**
- Attached is a copy of the legal documentation of the name change.  
(Example: marriage license, divorce decree, court order, etc.)

**I certify that I am the person whose name appears on the name line of this form,  
and do hereby authorize the change of my student record information.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*Please allow 24-48 hours for processing.*

For Office Use Only