



OFFICE OF THE REGISTRAR

# Student Name/Identification Change Form

*Student Workers and Employees must contact the Office of Human Resources*

Send to: Office of the Registrar - P.O. Box 1570, State University, AR 72467 • registrar@astate.edu

Name: \_\_\_\_\_

Change to (if applicable): \_\_\_\_\_

*Must supply copy of both new Driver's License and Social Security card  
OR Marriage/Divorce Decree*

Student ID/Social Security Number: \_\_\_\_\_

Change to (if applicable): \_\_\_\_\_

*Must supply a copy of new Social Security Card*

**To update your Address, Telephone Number or Emergency Contacts, please login to your account on the Arkansas State University website and make these changes using the Banner Self-Service system.**

***IMPORTANT: This form must include your signature.***

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

Date: \_\_\_\_\_

**For Office Use Only:**

Date Received: \_\_\_\_\_

Date Processed: \_\_\_\_\_