

CHANGE OF PERSONAL INFORMATION

1. Appropriate documentation **must** accompany all changes.
2. Please allow **two business days** for processing.

STUDENT INFORMATION:

- Mr.
 Mrs.
 Ms.

First Name

Middle Initial

Last Name

Student ID Number

Academic Program:

- Chicago-Kent College of Law Center for Law and Financial Markets Stuart Graduate School of Business

Change of Address:

- Local Permanent Employment Emergency (Next of Kin)

Address

City

State

Zip

Home Phone

Work Phone

E-mail Address

Change of Name:

Reason for change

Previous name

Corrected name

Social Security Number Change:

Previous or incorrect SSN

Corrected SSN

Student's Signature

Date