

OFFICE OF THE UNIVERSITY REGISTRAR

Name and/or Social Security Number Change

University of Houston | Office of the University Registrar Houston, Texas 77204-2027 | (713) 743-1010, option 7

*Student Name (as listed on un	iversity record)				
First name	Middle name		Last name		
myUH ID Number	*What are you requesting to add or update?				
		Update Name (Complete Section A)			
	Update/Add Social Security Number (Complete Section B)				
Section A: Student Name Char	ισο				
The University of Houston record of yo		y taken from your appl	ication for admission and may b	be changed if:	
You have married, remarried, or div provided)	orced (a copy of marris	age license or portion of	of divorce decree indicating nev	v name must be	
2. You have changed your name by co	urt order (a copy of the	e court order must be p	rovided)		
3. Your legal name is listed incorrectly valid passport, etc., must be provide	•	ence exists for its corre	ction (driver license, state ID, b	irth certificate,	
NOTE: A request to omit a first or midd accompanied by appropriate document as a driver license, passport, or militar	ation. <u>All</u> documents n				
Please print and complete the followi	ng information:				
I request that my legal name be change		versity of Houston rec	ords as listed below:		
Check reason for name change request:	Marriage/Divor	ce Court order	Correction of error		
FROM: First name	Middle nar	me	Last name	Suffix	
TO: First name	Middle name		Last name	Suffix	
Section B: Student Social Secu	rity Number Chai	nge			
The University of Houston record of your may be changed only if the student has must provide a copy of the Social Secusubmitted with a valid government-iss	obtained a new social rity Card. The Social	security number or an Security card must inc	error was made. In either case, elude the student's signature an	, the student	
Please print and complete the followi University of Houston records as listed Check reason for Social Security Numb	below:	uest that my Social Sec Correction of error	curity Number be changed and a		
·	oer enunge request.		1100111011 01 221 (10 0111	versity records	
FROM:		TO:			
I authorize the University of Hou	ston Main Campus				
requested above.	•	•	- •		
*SIGNATURE (REQUIRED)			Date		