



OFFICE OF THE REGISTRAR

FLORIDA ATLANTIC UNIVERSITY

777 Glades Road • P.O. Box 3091

Boca Raton, Florida 33431-0991

Fax: (561) 297-2756

Telephone: (561) 297-3050

email: registrar@fau.edu

Request for Change in FAU ID or SSN

(To Change OWL Card or Social Security Number)

Please enter your Student ID:

Please enter your Last Name:

Please enter your First Name

Please enter you address: Number and street:

Apt. #

City:

State:

Zipcode:

IMPORTANT NOTES: Please continue to use your current (old) ID number for all transactions at FAU until you are notified by this office that the change has been processed.

Anyone with an assigned ID# will not be eligible for Financial Aid from FAU and the University will not be able to certify deferment for prior semesters.

IF THIS CHANGE INVOLVES A SOCIAL SECURITY NUMBER, A COPY OF YOUR SOCIAL SECURITY CARD IS REQUIRED.

I, _____ hereby request that my current FAU ID/Social Security Number - - - - - be changed to - - - - - (new number).

The reason for this change is:

COLLEGE:

_____ Signature _____ Date: _____

REMEMBER TO USE YOUR CURRENT ID UNTIL YOU ARE NOTIFIED OF THE CHANGE.
FOR OFFICE USE ONLY

Date Rec'd:	Processed/DATE:	Former No. Deleted:
	Processed/BY:	Notification mailed: