General Change Form

PLEASE RETURN TO THE REGISTRAR'S OFFICE.
Any questions call 914-422-4032.

STUDENT ID NUMBER                     LAST NAME                             FIRST NAME
MIDDLE
If this is a new address/phone #, please indicate what you would like to be updated on your record  □ Address  □ Telephone

STREET ADDRESS/P.O. BOX       CITY       STATE       ZIP CODE       PHONE NUMBER       EMAIL ADDRESS

Please check appropriate boxes:
LEVEL:
□ JD
□ LLM
□ SJD

Have you previously received a Pace Degree?  □ YES  □ NO  Date Received ________________

PLEASE NOTE: ORIGINAL documentation must be provided to substantiate this application.

SOCIAL SECURITY CHANGE

ALL of the following original documentation is required: Social Security Card and Picture ID.
          CURRENT

MARITAL STATUS CHANGE

ALL of the following original documentation is required: Marriage Certificate or Naturalization Certificate or Court Document or Court Divorce Document and Picture ID.
          CURRENT

GENDER CHANGE

ALL of the following original documentation is required Court Document and Picture ID.

NAME CHANGE

ALL of the following original documentation is required: Social Security Card, and Picture ID and ONE of the following:
Marriage Certificate, Naturalization Certificate, Court Document, or Court Divorce Document
          CURRENT

FOR OFFICE USE ONLY:
UPDATE SPAIDEN
DOCUMENTATION COPY ATTACHED
TICKET CREATED AND SENT TO ITS
COPY INTEROFFICED TO CAMPUS DIRECTORS OF FINANCIAL AID
ORIGINAL WITNESSED
ENTERED BY
OSA ADVISOR                              DATE
OSA ADVISOR                              DATE