



Change of Information Form

Office of the Registrar, 100 International Drive 5th Floor, Baltimore, MD 21202

Phone: 410-234-9250 Fax: 410-800-4096

Submit this form or request assistance through SEAM's online form:

<https://support.sis.jhu.edu/case/>

Name: _____
*Last *First *Middle

*Date of Birth Hopkins ID (6 characters)

Contact: _____ Telephone: _____
Email Day Evening

Check all that apply:

Name Change* SSN change/correction* Address Change

** The following documentation is required for name changes: copy of marriage certificate, divorce decree, or court order. For social security number changes or corrections, a photocopy of the social security card is required.*

Name Change*

Current Name:

Last Name First Name, Middle Initial HOPKINS ID

Former Name:

Last Name First Name, Middle Initial

SSN Change/Correction*

Former government/school issued identification number: _____

New government issued identification number: _____

Address Change:

FROM: Address _____ TO: Address _____

City State Zip Code Country City State Zip Code Country

Home Phone: (_____) _____ Email Address: _____

I consent to the requested change(s) to my academic record and understand that I can obtain confirmation of this change by using the student information system student self-service. <https://isis.jhu.edu/sswf/>

Student's Signature

Date