



Kekaulike Information and Service Center (KISC)

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NAME CHANGE or SOCIAL SECURITY NUMBER FORM

Complete this form with the required documentation attached and return to the address above. Forms without appropriate documentation attached will not be processed. Students changing their names after the semester begins should inform their instructors of their name change. Please type or print clearly.

Current Name on Record: _____
Last First Middle

UH Number: _____ Daytime Phone/Cell: _____

UH Email Address: _____@hawaii.edu

☐ SUBMIT SOCIAL SECURITY NUMBER (for Admissions): _____ - _____ - _____

☐ CHANGE SOCIAL SECURITY NUMBER. Attach a copy of your Social Security Card.

From: _____ - _____ - _____

To: _____ - _____ - _____

☐ CHANGE NAME to: _____
Last First Middle

CHECK ONE and PROVIDE THE APPROPRIATE DOCUMENTATION:

- ☐ Correct error in spelling
(Birth certificate, State ID, US Military ID, Passport, U.S. Resident Alien Card)
- ☐ Change due to marriage
(Marriage certificate)
- ☐ Change due to divorce
(Divorce decree)
- ☐ Legal Change of Name
(Court Petition for Name Change, U.S. Naturalization Certificate)

STUDENT'S SIGNATURE _____ **DATE** _____

OFFICE USE ONLY

Banner ID: _____

Notified: OVA OFA OHIC OUH-ITS

Student Type: OCurrently Enrolled OReturning OFirst Time New/Transfer

Completed By/Date: _____

Folder Changed By/Date: _____