

## Data Change Form

Current students may update their personal information on My Sac State (http://my.csus.edu)

STUDENT IDENTIF			
NameLas	st	First	Middle
CHECK ONE BOX		currently an active student. a former student.	
PLEASE COMPI	LETE ONLY	THOSE SECTIONS BELOW WH	ICH REQUIRE CORRECTIONS
NOTE: MO	ST UNIVERSI	ITY MAIL CANNOT BE SENT T	O OVERSEAS ADDRESSES
Address		Name and Number	Apt Number
City/State/Zip	City	State	Zip Code
Phone Number (	)	Email	
I authorize the Cal corrections:	lifornia State	e University, Sacramento Re	gistrar to make the following
STUDENT'S SIGNATURE			DATE
		THIS FORM FOR MAJOR OCIAL SECURITY NUMB	
FO	R OFFICE	USE ONLY	
Updated By		Date	