



Name or Data Change Form

Name: _____ Perm #: _____
Last First Middle

Student Class Level (select one): Undergraduate Graduate Alumni / Non-Current

Important Information: PLEASE READ

- Documentation:** Changes marked with (*) must be accompanied by acceptable documentation. Please submit a copy of your documentation. Do not submit originals. Acceptable documentation includes, but is not limited to:
 - Marriage License • Driver's License • Court Order • Government-Issued ID • Social Security Card • Passport
- Name Change:** A name change must match your full legal name. Nicknames, abbreviations, or initials are not accepted, unless used as your legal name. Please provide documentation that explicitly states your legal name.
- Preferred Name:** To specify a preferred first name, log into the Identity Services Directory Editor, and update the "Preferred Name" field: <https://secure.identity.ucsb.edu/editor/>
- Gender Identity:** No documentation is needed to correct Gender Identity and/or Sexual Orientation. You may correct these fields in GOLD (my.sa.ucsb.edu/gold), under My Personal Info.
- UCSB Employees:** If you are a current or former UCSB employee, it is advised that you contact your employer's payroll coordinator to update your legal information in Payroll/Personnel System (UCPath), as it may impact your student data.
- Processing Time:** Please allow 10 business days for processing.

Instructions:

- Select the Student Data field that is incorrect (left column) and provide the correct information (right column). **Only complete selected fields to be corrected. Do not fill out any other fields.**
- Sign and return this form with a photocopy of your documentation to the Office of the Registrar: Registration@sa.ucsb.edu.

Student Data	Only complete fields to be corrected. Do not fill out any other fields.		
<input type="checkbox"/> Name*	Change from (Current name): _____ <div style="text-align: center;">Last Name First Name Middle Name</div> Change to (Legal name): _____ <div style="text-align: center;">Last Name First Name Middle Name</div>		
<input type="checkbox"/> Social Security Number*	Do not list your SSN. Visit the Office of the Registrar in person or speak with a representative virtually (https://kiosk.na1.gless.com/kiosk/app/home/100100000191) to update your SSN.		
<input type="checkbox"/> Date of Birth* (MM/DD/YYYY)			
<input type="checkbox"/> Place of Birth* (City, State, Country)			
<input type="checkbox"/> Ethnic Origin (Select one)	<input type="checkbox"/> Mexican American/ Chicano (E) <input type="checkbox"/> Latino/ Other Spanish American (5) <input type="checkbox"/> American Indian/ Alaskan Native (C) <input type="checkbox"/> Black/ African American (A) <input type="checkbox"/> White/ Caucasian (F)	<input type="checkbox"/> Pilipino/ Filipino (L) <input type="checkbox"/> Vietnamese/ Vietnamese American (V) <input type="checkbox"/> Chinese/ Chinese American (2) <input type="checkbox"/> East Indian/ Pakistani (R) <input type="checkbox"/> Japanese/ Japanese American (B)	<input type="checkbox"/> Korean/ Korean American (X) <input type="checkbox"/> Pacific Islander/ Micronesian/ Polynesian (M) <input type="checkbox"/> Other Asian (Y) <input type="checkbox"/> Other (D) <input type="checkbox"/> Decline to state (G)
<input type="checkbox"/> Multi Ethnicity (Select all that apply)	<input type="checkbox"/> Cuban (32) <input type="checkbox"/> Latin American (33) <input type="checkbox"/> Mexican/ Chicano (17) <input type="checkbox"/> Puerto Rican (38) <input type="checkbox"/> Other Spanish/ Latino (21) <input type="checkbox"/> American Indian/ Alaskan Native (2) <input type="checkbox"/> African American (1) <input type="checkbox"/> African (30) <input type="checkbox"/> Caribbean (31) <input type="checkbox"/> Other Black/ African American (36) <input type="checkbox"/> White/ European descent (29) <input type="checkbox"/> Other White/ Caucasian (37) <input type="checkbox"/> Fijian (7) <input type="checkbox"/> Guamanian/ Chamorro (9) <input type="checkbox"/> Hawaiian (10) <input type="checkbox"/> Samoan (23) <input type="checkbox"/> Tongan (27) <input type="checkbox"/> Other Pacific Islander (20) <input type="checkbox"/> Other (18) <input type="checkbox"/> Decline to state (0)	<input type="checkbox"/> Asian Indian (3) <input type="checkbox"/> Bangladeshi (4) <input type="checkbox"/> Cambodian (5) <input type="checkbox"/> Chinese (6) <input type="checkbox"/> Filipino (8) <input type="checkbox"/> Hmong (11) <input type="checkbox"/> Indonesian (12) <input type="checkbox"/> Japanese (13) <input type="checkbox"/> Korean (14) <input type="checkbox"/> Laotian (15) <input type="checkbox"/> Malaysian (16) <input type="checkbox"/> Pakistani (22) <input type="checkbox"/> Sri Lankan (24) <input type="checkbox"/> Taiwanese (25) <input type="checkbox"/> Thai (26) <input type="checkbox"/> Vietnamese (28) <input type="checkbox"/> Other Asian (19) <input type="checkbox"/> Afghan (72) <input type="checkbox"/> Algerian (61) <input type="checkbox"/> Amazigh (62) <input type="checkbox"/> Armenian (39) <input type="checkbox"/> Assyrian/ Chaldean (40) <input type="checkbox"/> Azerbaijani (41) <input type="checkbox"/> Bahraini (42) <input type="checkbox"/> Circassian (43)	<input type="checkbox"/> Djiboutian (63) <input type="checkbox"/> Egyptian (64) <input type="checkbox"/> Emirati (44) <input type="checkbox"/> Georgian (45) <input type="checkbox"/> Iranian (46) <input type="checkbox"/> Iraqi (47) <input type="checkbox"/> Israeli (48) <input type="checkbox"/> Jordanian (49) <input type="checkbox"/> Kurdish (50) <input type="checkbox"/> Kuwaiti (51) <input type="checkbox"/> Lebanese (52) <input type="checkbox"/> Libyan (65) <input type="checkbox"/> Mauritanian (66) <input type="checkbox"/> Moroccan (67) <input type="checkbox"/> Omani (53) <input type="checkbox"/> Palestinian (54) <input type="checkbox"/> Qatari (55) <input type="checkbox"/> Saudi Arabian (56) <input type="checkbox"/> Somali (68) <input type="checkbox"/> Sudanese (69) <input type="checkbox"/> Syrian (57) <input type="checkbox"/> Tunisian (70) <input type="checkbox"/> Turkish (58) <input type="checkbox"/> Yemeni (59) <input type="checkbox"/> Other North African (71) <input type="checkbox"/> Other Southwest Asian (60)

Student Signature: _____ Date: _____

E-mail: _____ Phone: _____

Office of the Registrar Use Only:
Documentation verified by: _____ Date system updated: _____