



STANDARD COLLEGE OF NURSING
7704 Leesburg Pike, Falls Church, VA 22043
Tel: 703-891-1787 Fax: 703-891-1789
www.standardcollege.edu

CHANGE OF NAME OR SOCIAL SECURITY NUMBER

This form should be submitted to the Administration for a change of name or Social Security number:

• When a student's legal name or Social Security number is changed, Standard College requires documentation authorizing the change.

Student name: _____
Last First M.I.

Change to: _____
Last First M.I.

Social Security Number: _____ Change to: _____

Date of Birth: _____ Change to: _____

Student's signature: _____ Date: _____

OFFICE USE ONLY:

- Documents presented:
- | | |
|---|--|
| <input type="checkbox"/> U.S. Passport | <input type="checkbox"/> Court Order |
| <input type="checkbox"/> Foreign Passport
Country of origin: _____ | <input type="checkbox"/> Marriage License |
| <input type="checkbox"/> Driver's License:
State: _____ | <input type="checkbox"/> Divorce Decree |
| <input type="checkbox"/> Certificate of Naturalization | <input type="checkbox"/> Social Security Card |
| <input type="checkbox"/> Government-issued ID Card:
Agency: _____ | <input type="checkbox"/> U.S. Military Card |
| | <input type="checkbox"/> Voter's Card |
| <input type="checkbox"/> Other: | <input type="checkbox"/> Permanent Resident Card |

Verified by _____ Date: _____ Entered by: _____ Date: _____