



Stevens Institute of Technology
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 Hoboken, NJ 07030
 201.216.5210
 FAX 201.216.8030
Office of the Registrar
 registrar@stevens.edu
 http://www.stevens.edu/registrar

Address/Name/SID Change

LAST NAME																																																																																																			
FIRST NAME																																																																	MIDDLE NAME/INITIAL																																		

ID NUMBER

<input type="checkbox"/> UNDERGRADUATE CLASS OF 20 ____ <input type="checkbox"/> GRADUATE
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Student Name Change. Enter new name as you want it to appear on your records. (Proof of legal name change must be attached.)

LAST NAME																																																																																																			
FIRST NAME																																																																	MIDDLE NAME/INITIAL																																		

Student ID Number Change (Stevens 999 number to Social Security Number **ONLY**; Copy of Social Security Card must be attached.)

SOCIAL SECURITY NUMBER

Student Address Change.

IN CARE OF (if applicable)																																																																																																			
NO.										STREET																																																																																									
CITY																																																																	STATE										ZIP CODE																								
COUNTRY (if not USA)																																																																																																			
PHONE NUMBER (include Area Code and/or Country Code)																																																																																																			

Billing Name/Address Change.

BILLING IN CARE OF																																																																																																			
NO.										STREET																																																																																									
CITY																																																																	STATE										ZIP CODE																								
COUNTRY (if not USA)																																																																																																			
PHONE NUMBER (include Area Code and/or Country Code)																																																																																																			

STUDENT SIGNATURE

____/____/____
DATE