

Return to:  
Indiana University of Pennsylvania  
Office of the Registrar

Clark Hall  
1090 South Drive  
Indiana, Pennsylvania 15705  
Phone: (724) 357-2217 Fax: (724) 357-4858

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## STUDENT IDENTIFICATION (SOCIAL SECURITY) NUMBER CHANGE FORM

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Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_ Date of Birth: \_\_\_\_\_

Banner Student ID#: @ \_\_\_\_\_

Please make the following change:

- ... Social Security Number Correction
- ... Duplicate Social Security Number Correction (For National Student Clearinghouse purposes.)

Social Security numbers are maintained for student employment and Federal Financial Aid processes.  
I understand that my entire student record will be transferred.

Social Security Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_.

It is required that you provide legal documentation for your Social Security number change. If mailing this form, please send a copy of your Social Security card showing the correct number.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print your name here.

**\*\*Federal law requires that the student sign and date this request.\*\***

For Office Use Only:

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Social Security Number Change Form./ 03/02/2017

Date Processed: \_\_\_\_\_

Processed by: \_\_\_\_\_