



Student Academic Services

# Change of Directory Information

## PERSONAL INFORMATION

Name: \_\_\_\_\_ SPU ID#/SSN: \_\_\_\_\_

Relationship to SPU:  Undergraduate Student  Graduate Student  Alumni  Continuing Education  Non-Admitted Student

### Admitted Students:

Quarter of Admission to SPU:  Autumn /  Winter /  Spring Year: \_\_\_\_\_

Quarter of Graduation from SPU:  Autumn /  Winter /  Spring Year: \_\_\_\_\_

### Non-Admitted Students:

Approximate Dates of Attendance at SPU: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Please check appropriate changes:

**Change of Birthdate**

Please attach copy of Driver's License or Passport

DOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*Day Month Year*

**Change of Name**

Please attach a copy of one of the following documents that contains your changed name:

- Court Order Document
- Driver's License
- Marriage Certificate or License
- Passport
- Social Security Card

Current Name: \_\_\_\_\_  
*Last First Middle*

Former Name: \_\_\_\_\_  
*Last First Middle*

**Mailing Address**

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Non-SPU Email Address**

This will replace any other non-SPU email addresses

Email: \_\_\_\_\_

**Phone Number**

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Office Use Only:  INB Updated Initial: \_\_\_\_\_ Date: \_\_\_\_\_

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