

SOCIAL SECURITY NUMBER CHANGE

- A copy of your social security card reflecting the correct number change is required.

Print name as it is currently appears on your record:

| | | |
|----------------------|--------|---------------|
| _____ | _____ | _____ |
| Last | First | Middle |
| _____ | | |
| Maiden Name or Names | | |
| _____ | | |
| Phone Number: _____ | | |
| _____ | _____ | _____ |
| Home | Local | Cell |
| _____ | | |
| _____ | _____ | _____ |
| WKU Email Address | WKU ID | Date of Birth |

-
- **Change Social Security Number to:** _____ - _____ - _____

Reason for Social Security Number Change:

Acquired Social Security Number Clerical Error Other

Student Signature Date

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Methods for submitting this form with a copy of your social security card:

- **MAIL:** Office of the Registrar, Western Kentucky University, 1906 College Heights Blvd #11017, Bowling Green, KY 42101-1017
- **FAX:** (270)745-4830 Attention: Laura Dilliha.
- **Do not send by email as it is not a secure site**

Office Use Only

Change Needed in:

_____ Student ID _____ Delete this record (appropriate data has been moved to other record)

Checklist:

| | | |
|-----------------------|----------------------------|--------------------------|
| _____ Human Resources | _____ Social Security Card | _____ Currently Enrolled |
| _____ Hard Copy | _____ Banner | _____ Permanent File |

Employee Initials/Date