

**UNT | DALLAS**  
Office of the Registrar

**REQUEST TO CHANGE OR CORRECT RECORDS**

(Only the person to whom these records belong may request changes.)

*State law and university policy, with limited exceptions, allow you to be informed about information the University collects about you, to review and obtain the information on this form, and to correct any information you believe is incorrect.*

**While this form is provided online for convenience, the student must present this completed form along with one form of identification to verify the change for the Registrar's Office to complete the request. Please see Required Documentation list below. Please email the documents to the Registrar's Office at [registrar@untdallas.edu](mailto:registrar@untdallas.edu).**

ID#: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First M.I.

Currently Enrolled: Yes  No  If no, date of last enrollment: \_\_\_\_\_

Mailing Address To:

\_\_\_\_\_  
Street City, State Zip Phone#

Permanent Address To:

\_\_\_\_\_  
Street City, State Zip Phone#

Birth Date To: \_\_\_\_\_

Gender From: \_\_\_\_\_ To: \_\_\_\_\_

Name: From: \_\_\_\_\_  
Last First M.I.  
To: \_\_\_\_\_  
Last First M.I.

Reason: \_\_\_\_\_

Social Security Number: From: \_\_\_\_\_ To: \_\_\_\_\_

Emergency Notification:

\_\_\_\_\_  
Name Relationship  
\_\_\_\_\_  
Street City, State Zip Phone#

Required Documentation List

- Driver's License/State ID     Passport     Marriage License     Court Order     Social Security Card

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