



The City University of New York
 International Students Office
 Division of Student Affairs
 Phone: (212) 772-4864



F-1/J-1 STUDENTS CHANGE OF NAME/ADDRESS FORM

_____	_____	_____
Last Name	First Name	Middle Name
_____	_____	_____
CUNYfirst/EMPL ID#	Program of Study	Hunter Email address
_____	_____	_____
Semester & Year of Matriculation	Expected Graduation Date	Personal Email Address

Type or write information as it appears on CURRENT Hunter records	CHANGE TO: (fill in appropriate information. In other words only provide the information that is different from the CURRENT on the left side)
CUNYfirst ID# (EMPL ID#)	CUNYfirst ID# (EMPL ID#)
Last Name	Last Name
First Name	First Name
Number and Street Address	Number and Street Address
City, State	City, State
Zip Code + (please add the last <u>4 Digits</u>) https://tools.usps.com/zip-code-lookup.htm?byaddress	Zip Code + (please add the last <u>4 Digits</u>) https://tools.usps.com/zip-code-lookup.htm?byaddress
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Telephone with Area Code	Telephone with Area Code

If applicable, attach document to support your name change.

I certify that the above information is true and correct. I understand that it is my responsibility to maintain my legal status with the U.S. Immigration and Naturalization Service and not the responsibility of Hunter College.

_____	_____
Student signature	Date
_____	_____
Designated School Official's Signature Alternate Responsible Officer's Signature	Date