

Send completed form to registrar@roseman.edu

Use this form if you need to update your contact information or if your name has changed. If submitting a name change, you must include a copy of your U.S. Social Security Card or U.S. Passport showing your new name. Without proper documentation, Roseman University will be unable to process the name change.

Please allow 3-5 business days for updates to be processed. Processing times may be extended during peak periods. Expedited processing is not available.

Student Information

| | | |
|-----------|------------|-------------|
| Last Name | First Name | Middle Name |
|-----------|------------|-------------|

| | |
|-------------------|-----------------------------------|
| Student ID or DOB | Roseman E-mail or Personal E-mail |
|-------------------|-----------------------------------|

Program: _____ **Campus:** _____

Please indicate the action you wish to take:

Contact Updates
(Specify changes below)

Name Change
(Attach a copy of your Social Security Card or Passport, reflecting new name)

Address

| | | |
|-----------|------------|-------------|
| Last Name | First Name | Middle Name |
|-----------|------------|-------------|

Personal Email

Emergency Contact

Signature

Date

(Form must be signed for processing. Electronic, Typed and Handwritten Signatures Accepted.)
