

CHANGE OF LEGAL NAME/SOCIAL SECURITY NUMBER

Yale University Physician Assistant Online Program
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Submit this form to the PA Online Registrar, with the appropriate documentation.

Email: renee.kamauf@yale.edu, Fax: 203-785-6391, or Mail: Renée Kamauf, P.O. Box 208004, New Haven, CT 06520

Legal name changes: Social Security card, valid driver's license, valid passport, birth certificate, or court order.

SSN changes: Copy of Social Security card and government-issued photo ID

No change will be made without proper and valid documentation.

Please print the following information. Leave fields blank if there is no change.

Student ID Number (SID)

Class Year

Former Last Name

New Last Name

Former First Name

New First Name

Former Middle Name

New Middle Name

Former SSN

New SSN

Please adjust my record to reflect the change in name or Social Security number indicated above.

Printed Name

Email Address

Signature

Date

For Registrar's use only

Please circle:

Social Security Card

Driver's License

Passport

Birth Certificate

Court Order

Updated in Banner by: _____ Date: _____