

The UNIVERSITY of MONTANA WESTERN

Request to Change Student Information

INSTRUCTIONS: Read & follow instructions. Use this form to request changes to student information maintained at UMW. Complete this form as soon as possible following your decision to make a change. Print legibly. Be very specific, include ALL pertinent information. Complete Parts A, B & C, and then submit completed forms to the Registrar's Office. Answer all questions. **Incomplete or improperly completed forms will be rejected.**

Print Name _____ Student ID _____ Birth date _____

Current Address (Street or PO Box Number) _____ City _____ State & Zip Code _____

E-MAIL Address (other than your UMW e-mail address): _____

PART A: What changes are you requesting (check all that apply, BE VERY SPECIFIC)?

1. **Name Change** - you must provide a copy of legal documents verifying legal name change - a marriage license or a court or judges order, for example.
2. **Address Change** - change which address: Mailing (temporary)* Permanent ** E-mail
*Students can update mailing address information on DAWGS (dawgs.umwestern.edu). Change "Billing Addresses" at the UMW Business Services Office.
3. **E-Learning only - change status (check) to or from "e-Learning only"** (submit completed form by the full-term Dead-line to add classes). E-Learning only students are restricted to taking only courses designated as e-Learning courses during the specified term, **NO EXCEPTIONS!** An eLearner form may also be completed electronically at the Registrar/Registration website at umwestern.edu. Requests for eLearner status are not accepted after the 15th instruction day of the semester.
4. **Withhold Directory Information**, I wish to have my directory information kept confidential (no Part B section required).

PART B: Provide all pertinent information for each change requested, be very specific.

1. **Name Change:** _____
Previous or former Name _____ New Name _____

*You must attach a copy of a legal document (marriage license, court order, etc.) verifying that a legal name change has occurred.

2. **New Address Information*:** Street or PO Box - _____
City, State & Zip - _____

**If requesting changes to Permanent/Parents Address, you must answer the next two questions below:

Who else lives at this (permanent) address? _____ Relationship? _____

NEW E-mail address > _____

*Be sure to indicate (check appropriate space in Part A-2) which address(es) you want changed.

3. **Change status (circle one) to or from "e-Learning only"; designate (below) the semester and year for which this change is Requested.**

_____ Term (Fall, Spring, Summer)

_____ Academic Year (example 2011-12)

*To assure timely processing, petitions to change status to/from "e-Learning only" changes must be filed in the Registrar's Office **before the start of the TERM**. E-Learning only students are limited to attempting e-Learning only courses during the term/year designated above; **NO mid-semester status changes will be considered (no appeals)**.

PART C: Only "authorized" changes will be processed; you must sign and date this form before submitting it to the Registrar's Office. Your request will be processed as soon as possible and should be effective within 1-6 weeks depending upon the request. You are responsible for meeting applicable deadlines.

Student Signature

Today's Date