



**TEXAS A&M**  
UNIVERSITY  
CENTRAL TEXAS

### Permanent Record Update Form

Student Name \_\_\_\_\_ Date \_\_\_\_\_

ID# \_\_\_\_\_ Email \_\_\_\_\_

#### Mandatory Section:

Please complete the section below exactly as it appears on your current permanent record.

Last Name	First Name	Middle Initial	Social Security Number

#### Name Change Section:

Please attach a copy of the Legal documentation for name change i.e., Marriage certificate, Divorce Decree etc.

Last Name (Changing to)	First Name (if applicable, Changing to)

#### Social Security Number Change Section:

Please attach a copy of your New Social Security Card indicating the change of number.

New Social Security Number

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

\_\_\_\_\_  
Date

Please Return to:  
Texas A&M University – Central Texas  
Records Office  
1001 Leadership Place  
Killeen TX 76549  
Phone (254)501-5857  
Fax (254) 519-5486

Processed by/Date: \_\_\_\_\_