



PERSONAL INFORMATION FORM

*completed form may be emailed to
global@flagler.edu or delivered in person

Family Name: _____ First Name: _____

Flagler ID: _____ Visa Type (circle one): **F** | **J**

International (F-1) students are asked to submit this form to the Center for Global Education whenever there is a change to their academics, legal name or address. U.S. law requires that students notify the CGE within 10 days of these changes. Please keep the CGE as up to date as possible on your academics, legal name and U.S. address.

Change in Legal Name: *Only students changing their legal names must complete*

Legal New Family Name: _____ Legal New First Name: _____

Gender Affirmation (provide new gender): _____

I am submitting evidence to this form (please check): ☐ Yes ☐ No (If you check *No*, we cannot process your request.)

Change in Academics: *Only students changing academics must complete*

Please check what applies to your situation:

☐ I am changing my major. ☐ I am changing my minor. ☐ I am changing my graduation date.

New Major _____ New Minor: _____ New Graduation Date: ____/____/____
MM DD YYYY

Change in Address: *Only students changing their address must complete*

New Address (include dorm room if living on campus):

Mailing Address (if different from physical address): _____

****Please allow 5 business days for your information to be updated. Should your request result in a new Form I-20, a CGE staff person will contact you.****

Student Affirmation: I confirm that the information on this form to be true. I will continue to update the Flagler College CGE if this information changes.

_ Signature

Date