



- Harlem Campus
Middletown Campus

Change of Social Security Number Request

Please bring this form, together with both ORIGINAL Social Security cards (showing the OLD and NEW numbers), to the Office of the Registrar.

To be completed by the student:

First Name: Last Name:

Middle/Maiden Name: Touro Student ID #:

Telephone #: E-mail:

By completing this form, I am requesting that the Social Security number on my Touro College record be changed as follows:

Previous Social Security #:

New / Correct Social Security #:

Reason for the Social Security number change:

INDEMNIFICATION: By executing and submitting this request the undersigned irrevocably agrees to defend, indemnify and hold Touro College harmless from all claims, demands and/or liabilities arising out of or related to this request.

Student's Signature: Date:

NOTARY PUBLIC (Required)

STATE OF

COUNTY OF



Subscribed and sworn to before me this day of , 20

Notary Public Signature:

TO BE COMPLETED BY THE REGISTRAR
Received By: Date:
Processed By: Date: