KEAN

Office of the **Registrar**

Social Security Number Correction Request

This form is to be used by individuals to correct their Social Security Number within Kean University's student records.

First Name _____ Last Name _____ Kean University ID Number _____

Date of Birth _____ Kean Email Address _____@kean.edu Phone Number _____

Instructions:

1. Complete this form with the requested information.
2. Make a copy (scan) of your current Social Security card issued by the Social Security Administration.
3. Return this form and copy of your current Social Security card to the Office of the Registrar or email this form and required document to regme@kean.edu.

This is to certify the Social Security Number below is correct and has been issued by the Social Security Administration.

			-			-				

Signature _____ Date _____

Please deliver this completed form, along with the required documents, to the Office of the Registrar/One Stop Service Center or email this form and required documents to regme@kean.edu.

OFFICE USE ONLY:		
Completed By:	**Date Completed:**	Form Revised: 10/30/24