



## CHANGE OR CORRECTION OF DATE OF BIRTH

Student Information	
CUNYfirst ID: _____	Phone: _____
First Name: _____	Last Name: _____
I am a:	<input type="checkbox"/> Current Student <input type="checkbox"/> Prior Student <input type="checkbox"/> Alumni
Are you receiving Financial Aid or Loans?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Signature: _____	Date: _____

\*Please note that any communication regarding this form will be sent to your QMail account.

In order to correct your date of birth you must present your **original** Birth Certificate or valid City, State, or Federal ID, along with an additional photo ID, to the QC Hub in the Dining Hall, room 128. All original documents submitted will be returned to the student.

Indicate your correct date of birth:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Month      Date      Year

For Office Use Only		
Received by: _____	Date: _____	Notes: _____
Processed by: _____	Date: _____	Notes: _____