



Update of Personal Information

*Please use this form to update your legal name,
mailing address, and contact information.*

Current Legal Name: _____
First Middle Last

Preferred First Name: _____

Former Legal Name: _____
First Middle Last

NU ID# _____ Date of Birth: _____

Contact Information:

Mailing Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

Email: _____

Name Change - Legal Documentation Required:

Please attach a copy of one of the following legal documents that shows your new name:

- Driver's License
- Social Security Card
- Passport
- Court Order Document

Submittal:

Please scan and related documents or send copies to:

Electronic:

info@northwestu.edu

Fax: 425-889-5224

Postal Mail:

Northwest University

P.O. Box 579

Kirkland, WA 98083-0579

Signature & Date: _____
Signature Date

Office Use Only – Form Revised 5/2021

- | | | |
|--------------------------------------|----------------|-------------|
| <input type="checkbox"/> CRM updated | Initial: _____ | Date: _____ |
| <input type="checkbox"/> SIS updated | Initial: _____ | Date: _____ |
| <input type="checkbox"/> SFS updated | Initial: _____ | Date: _____ |