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## BIRTH DATE CORRECTION REQUEST

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Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_ Date of Birth: \_\_\_\_\_

Banner ID: @\_\_\_\_\_

**Date of Birth:**

Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

*It is required that you provide legal proof of your Date of Birth, by providing a copy of **one** of these documents:*

Driver's License       Birth Certificate



**\*\*\* Your signature is required for processing. \*\*\***

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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***For Office Use Only:***