LANDER COLLEGE FOR WOMEN
THE ANNA RUTH AND MARK HASTEN SCHOOL

A Division of Touro College

Change of Social Security Number Request

Submit or mail to: Office of the Registrar, 227 West 60th Street, New York, NY 10023

Please bring this form together with both original Social Security Cards (showing old and new numbers) to the Office of the Registrar.

TO BE COMPLETED BY THE STUDENT:

Name (Please PRINT):_____
Last *First* *Middle/Maiden*

Touro ID # _____ Telephone# _____ E-mail: _____

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

Active Social Security number:_____-____-_____ to new, *correct* Social Security number: _____-____-_____

The 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. I understand that I will still be obligated for undertakings or sums attributable to my former social security number and I am not making this request to avoid support, obligations, taxes, levies, liens, judgments, proceedings or affect or interfere with the Financial Aid process or limits.

Student's Signature:_____ **Date:**_____

NOTARY PUBLIC (required):

STATE OF_____ }
} S.S.
COUNTY OF_____ }

Subscribed and sworn to before me this _____day of _____, 201___. SEAL/STAMP

Notary Public Signature:_____

TO BE COMPLETED BY THE REGISTRAR:

RECEIVED BY _____ **DATE** _____ **PROCESSED BY**_____ **DATE** _____

cc: Financial Aid Office