



Non-Tax Operating Account Personal Data Change Request Form

Check applicable:

- Change of Address
- Change of Name
- Change of Marital Status

Please fill in your current information on file

Current Date

Department Name

Last four digits SSN

Date of Birth

Gender

- Female
- Male

Last Name

Suffix

First Name

Middle Name

Address

City

State

Zip Code

Marital Status

- Single
- Married
- Divorced

Only fill in your information that needs to be changed:

Last Name

Suffix

First Name

Middle Name

Address

City

State

Zip Code

Marital Status

- Single
- Married
- Divorced

I hereby certify that the information above is true and accurate.

Please return form, with all original corresponding documents, for proof of change

Location: The Office of Fiscal & Business Services Center, 1146 Boylan Hall;

Phone: (718) 951-5502, Fax: (718) 951-4440