

**UNIVERSITY OF ILLINOIS
NAME AND SOCIAL SECURITY NUMBER (SSN) CHANGE FORM**

For use by Chicago and Springfield campuses only.

For employees who need to correct an incorrect SSN or submit a name change, this form should be completed by the appropriate representative in the employee's home department and submitted to the Campus Human Resources Office. For undergraduate student employees, the form should be submitted to the Student Employment Office.

For employees who need to change from a TCN to an SSN, this form should be completed by the appropriate representative in the employee's home department and submitted to the Campus Human Resources Office. Undergraduate student employees should submit the form to the Student Employment Office. A copy of this form and photo copied documentation (i.e. SSN card), should be submitted to the appropriate International Office. The home department should also retain a copy of this form and documentation.

| Contact Information | | |
|--|--|--|
| Name of Representative Submitting Request: | | |
| Department of Representative Submitting Request: | | |
| Contact Email: | Request Date: | |
| Contact Phone Number: | | |
| SSN & Name Change Information | | |
| Name of employee requiring change (for SSN changes only): | UIN of employee requiring change: | |
| Existing Temporary Control Number (TCN) or Incorrect SSN*: | | |
| New or Correct SSN*: | | |
| Reason for Change: <input type="checkbox"/> Change from TCN to SSN <input type="checkbox"/> SSN was incorrect/changed <input type="checkbox"/> Name Change | Previous Name: Name changed to: | Last: First: Middle: Last: First: Middle: |
| Required Documentation: (Please photocopy documentation and attach to this form.) 1. SSN Card issued by the Social Security Administration 2. Government Issued Photo ID (SSN change only) | | |
| Authorizing Signature | | |
| Signature of home department representative who is authorizing this change: | | |
| Department: | Date: | |

| | University of Illinois at Chicago | University of Illinois at Springfield |
|--------------------|--|---|
| Human Resources | (Academic Professional and Civil Service) Human Resources 401 HRB 715 S. Wood, MC-897 Chicago, IL 60612 Phone: 312-413-3490 Fax: 312-996-1803 | (Faculty) Faculty Affairs HR 1253 S. Halsted St. MC-095 Chicago, IL 60607-5023 Phone: 312-355-2412 Fax: 312-996-1700 FAHR@uic.edu |
| Student Employment | Student Employment 2200 SSB 1200 W. Harrison, MC-335 Chicago, IL 60612 Phone: 312-996-3130 Fax: 312-413-7944 | Student Financial Assistance University Hall, Room 1015 One University Plaza, MC UHB 1015 Springfield, IL 62703-5407 Phone: 217-206-6724 Fax: 217-206-7376 |

*Federal tax regulations require us to request an SSN from every employee to whom compensation is paid. Employee SSNs are maintained and used by the University for payroll and benefits purposes, to verify employment history, and are reported to Federal and state agencies on forms required by law or for benefits purposes. The University will not disclose an employee's SSN without the consent of the employee to anyone outside the University except as mandated by law or as required for benefit purposes. Failure to provide an SSN may result in the withdrawal of an offer of employment and/or the denial of benefits. The University of Illinois is working to minimize the use of Social Security numbers within its business processes. For a full description of the University of Illinois' Social Security number policy, please visit <http://www.ssn.uillinois.edu>.