



GEORGIA CHRISTIAN UNIVERSITY

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STUDENT INFORMATION CHANGE/CORRECTION REQUEST

Please provide accurate information. Any false information may result in academic probation, termination of student status, or unwanted expulsion in accordance with SEVIS regulations.

Current Information (현재 정보):

Name: _____ Gender: _____ Male _____ Female
Date of Birth: ____/____/____ (mm/dd/yyyy) Student ID #: _____
Degree Program: _____
Phone #: _____ Email: _____
Address: _____

Which information has changed? (Check all that apply 변경된 정보 모두 체크)

Address Telephone number Email address other _____

Please write the previous information (변경 이전의 정보)

I certify that the information provided on this request is correct to the best of my knowledge.

Requested by: _____

Signature: _____ Date: _____

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Office Use Only*

Approved By: _____ Title: _____

Signature: _____ Date: _____

*Please notify this change of information to the DSO/PDSO, if the student is F-1 Visa status holder.