



# PERSONAL DATA UPDATE FORM

Office of the University Registrar  
881 Commonwealth Avenue, Boston, MA. 02215  
Phone: 617-353-3612 Fax: 617-358-1689 Email: [registrar@bu.edu](mailto:registrar@bu.edu)

Use this form to update portions of your Boston University record. Students who wish to change their name as it is displayed on Boston University records must submit this form along with documentation of a legal name change such as a court approval of name change, marriage certificate, divorce decree, or naturalization papers. International students must report citizenship or visa code changes to the International Students and Scholars Office.

Boston University recognizes that there are many expressions of gender identity, however we must retain only the legal (binary male/female) sex and legal name of our students for University records and Federal reporting. Please update your directory release information should you wish to restrict the release of your legal name or other directory information.

More information can be found at: [www.bu.edu/reg](http://www.bu.edu/reg).

*The fields in this box are required for all students*

**Student Information:**

BU ID Number: \_\_\_\_\_ School or College: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current Name on BU Documents (First and Last): \_\_\_\_\_

*Fill in this box to update Legal Name and/or Legal Sex*

New Legal Name (last, first, middle): \_\_\_\_\_

Current Legal Sex on BU Documents:  Female  Male

New Student Legal Sex:  Female  Male

*Fill in this box to update permanent and/or local address, email, and phone number*

Permanent/Home Address:

Street Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Country, Province \_\_\_\_\_

Local Address (address in which you reside while taking classes at BU):

Street address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Cell Phone: \_\_\_\_\_ BU Directory Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

*Fill in this box to update emergency contact information*

Emergency Contact Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Telephone: \_\_\_\_\_

Student BU Emergency Alert Contact Phone: \_\_\_\_\_

(Required for notification of University-wide Emergency)

Is this a Cell Phone:  yes  no

*Please sign below to acknowledge that the information you have entered above is your legal personal information. This form must be accompanied by legal documents supporting the requested changes.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Directory Information Restriction**  
**Use this form to manage public access to your data at Boston University**

The Family Educational Rights and Privacy Act (FERPA) protects the privacy of your education records and restricts disclosure of personal information from your education records, except as authorized by law. For information on Boston University's FERPA policy, please refer to the Registrar's Office website at [www.bu.edu/reg/ferpa/ferpa-policy](http://www.bu.edu/reg/ferpa/ferpa-policy).

The University has designated certain types of personally identifiable information as "Directory Information." A list of this information is below. Unless restricted, Boston University may disclose any of the items of Directory Information without your consent.

Boston University will not release grades or GPA information without your prior consent. In addition, Boston University does not provide student lists outside the University for purposes of marketing.

Any and all data that you restrict below will not be released outside the University.

If you wish to restrict the release of your Directory Information, you may do so by using the Student Link, by completing the information below, or by visiting the Office of the University Registrar.

Name: \_\_\_\_\_ BUID: \_\_\_\_\_  
\_\_\_\_\_

Check to restrict:

- Local Address and BU Directory Phone Number:** If restricted, this information will not be listed in the BU online directory nor printed in the BU phone book.
- Email Directory Lookup:** If restricted, your email address will not be listed in the BU on-line directory.
- School or College:** If restricted, this information will not be released to anyone outside BU.
- Academic Program (Degree, Major, Minor):** If restricted, this information will not be released to anyone outside BU.
- Dates of Attendance, Full/Part-time Status:** If restricted, this information will not be released to anyone outside BU, including insurance providers and employers.
- Degrees, Honors, and Awards Received:** If restricted, this information will not be released to anyone outside BU, including insurance providers and employers.
- Commencement Program:** If restricted, your name, college, degree and honors will not appear in the Commencement Program when you graduate.
- Bostonia Yearbook:** If restricted, your name will not appear in the BU Yearbook when you graduate.

Please return to:

Boston University Office of the University Registrar  
881 Commonwealth Avenue, 2<sup>nd</sup> floor  
Boston, MA 02215  
Phone: 617-353-3612  
Fax: 617-358-1689  
Email: [registrar@bu.edu](mailto:registrar@bu.edu)

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Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_