

Personal Data Change Request Form Office of the Registrar, CSU East Bay

Name	Net ID			
Address	City	State	Zip	
Telephone Number (day)		Horizon Email Address		
Are you a current and/or former CSU EAid, Staff, and Faculty).	East Bay Employee? (Including F	ederal Work Study S	tudent, Student A	Assistant, Teacher
☐ YES – PLEASE STOP! You must information.	t visit the Payroll Office, Stude	nt Administration B	uilding, to chan	ge your personal
□ NO				