

Chaoyang University of Technology
Application form for changes of student information

Date : (Month/Day/Year)

Department /Institute		Name		Student ID	
Matters of changes	<input type="checkbox"/> Name <input type="checkbox"/> Birth Date <input type="checkbox"/> Address of Parents <input type="checkbox"/> Address of Residence <input type="checkbox"/> ID number <input type="checkbox"/> Birth Place <input type="checkbox"/> Telephone Number of Parents <input type="checkbox"/> Others _____				
Contents of changes					
Signature of applicant			Contact Telephone Number (Be sure to fill in)	Mobile phone number : Telephone number :	
Remarks	<p>1.One copy of the household registration transcript is require for the applications of changing name, ID number, residence address and the date of birth.</p> <p>2.It is require notifying the postal area code for the changing of address.</p> <p>3.Please do not check the fields that it is not changed.</p> <p>4.The application processes for changes of student information :</p> <p style="margin-left: 20px;">❶ Application form must be filled by the student—>❷ [Enclose with the relevant documents] —>❸.Submit the documents to the Registrar Section</p>				

Processing status : /