



Community College

LaGuardia Community College - Office of the Registrar

Gender Change Request

IMPORTANT: Submit this form to the Registrar's Office, room C-107 or email at registrar@lagcc.cuny.edu.

PLEASE PRINT CLEARLY

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CUNYfirst EMPL ID#

CURRENT LEGAL NAME

Last Name

First Name

Middle Name/Initial

GRADUATION YEAR (Expected):

Preferred Name (If applicable) (Please submit the preferred name request form or use self-service to reflect a preferred name in CUNYfirst. The preferred name is for internal CUNY purposes only, and may only reflect a change in first and/or middle name)

Preferred Name*:

First Name

Middle Name/Initial

No documentation is required to change your gender in CUNYfirst. Please be aware, however, that changing your gender in CUNYfirst may cause a mismatch if you are a recipient of federal financial aid. You are advised to contact your college's financial aid office to alert the office of the gender change. In addition, you are advised to contact the Social Security Administration, to prevent any problems with data mismatches between that agency's records and the information on file with the federal Department of Education, which administers federal student aid programs.

Male

Female

Transgender

Gender Nonconforming

Non-Binary

A gender not listed

Not specified (removing gender information)

I understand that this gender change is for internal CUNY purposes, and that CUNY is not responsible for notifying any other agencies of this change. I further understand that any inconsistencies between CUNY's record of my gender and the databases kept by other agencies may result in difficulties related to the processing and receipt of benefits caused by data mismatches. Finally, I understand that those agencies may require documentation to change gender in their records.

Student's Signature:

Date:

Signature from Pick-up:

Date:

Registrar's Office use only

Processed by:

Date:

ADDRESS: 31-10 Thomson Avenue
Long Island City, NY 11101

PHONE: 718-482-7200
WEB: www.laguardia.edu



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