



California Baptist University

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OPS Information Change Form

Relationship to University: (check all that apply) Current OPS Student CBU OPS Alumnus Previous OPS Student
 Staff/Faculty Student Employee Other _____

Information Changed: (check all that apply) Name Change (*requires copy of legal documentation, e.g. driver license, marriage license*)
For name change, would you like your LancerMail changed with new name? Yes No

Address/Phone Change Other _____

■ **Emergency Contacts:** Current students and employees may update their emergency contacts at any time through InsideCBU using the Emergency Contact Form on the "Life@CBU" tab

Personal Information:

SSN or CBU ID# _____

Last Name _____ First _____ Middle _____

Marital Status _____ Alternate Name/s _____ Date of Birth _____

Are you Hispanic or Latino? Yes No

Mark one or more of the following races: American Indian or Alaska Native Black or African American
 Native Hawaiian or Other Pacific Islander Asian
 White Hispanic/Latino
 Nonresident alien Race/ethnicity unknown

Permanent Address:

Mailing Address _____

City _____ State _____ Zip _____ Country _____

Email* _____ Home Phone _____ Mobile Phone _____

**Current students are required to keep their Lancermail as their primary e-mail.*

Signature _____ Date _____

Office Use:

Entered in CX _____ New Label Completed _____

CC: VA Official Graduation Database IT Help Desk Human Resources