



Biographical Information Changes

LSAC account #: _____

Name as currently listed on LSAC account: _____

Complete only the sections below that you wish to change.

Name as it should now appear on your LSAC account:

First/given name: _____

Middle initial: _____

Last name/family name/surname: _____

Previous last name(s): _____

Birth date as it should now appear on your LSAC account (MM/DD/YYYY):

Full signature (please print out this form and sign): _____

Today's date: _____

When submitting your request, please include a PDF scan of: (1) your signed and completed Biographical Information Changes form and (2) your government-issued ID. Send the scanned documents via email to LSACbio@LSAC.org. Please allow 3–5 business days from receipt of your request for processing.

Please note: If you need to make changes to your Social Security/Social Insurance number, you can submit your request and upload your supporting documentation through your LSAC online account.