

ENROLLMENT SERVICES/REGISTRATION AND RECORDS

4901 Evergreen Road  
1169 University Center  
Dearborn, MI 48128-2406  
T: 313-583-6500 F: 313-593-5697  
registrars@umich.edu

**GENDER CLASSIFICATION**

This form is used to request a change in your gender identity. Please fill out the form completely and submit to the Enrollment Services/Registration and Records Office.

<b>Student Information</b>	
Name	_____
UMID	_____
Uniquename	_____
<b>Gender - Please select one:</b>	
Male	<input type="checkbox"/>
Female	<input type="checkbox"/>
<i>By submitting this form, you are authorizing UM-Dearborn to update your gender as identified above.</i>	
Signature	_____ Date _____

<b>FOR OFFICE USE ONLY</b>		
Date Received	_____	Staff Initials _____
		Date Processed _____