Personal Information Update Request



Enrollment Management Department Student Records Section

This form should be completed by the student and submitted to the Registration Department for processing.

Student Information		
QU ID:	Name:	
College:	Major/ Minor:	
Mobile:	E-mail:	
Information to be Updated		
Name From: To:		
Nationality From: To:		
Student Signature		
Signature:	Date:	
Student Records Section		
Student Status:		
 Please attach: A copy of your valid ID card and a copy of your valid passport along with the originals for the copies to be verified. 		

Student Records Section Head Approval

Signature:

Date:

Student Records Section	
Implemented by:	Date:

 Please direct inquiries to:
 Females: 4403 3786/3792/3797 I
 Males: 4403 3796/5953

 Fax: 4403 3773 I
 E-mail: records@qu.edu.qa