

ALABAMA COMMISSION ON HIGHER EDUCATION

ALABAMA STUDENT UNIT RECORD DATABASE

CERTIFICATION FORM

STUDENT CHANGE RECORDS

Institution: _____

FICE Code: _____

Type of File:

Number of Student Change Records Submitted _____

Certification Statement

I certify that the attached Student Change Record submission properly reflects changes in student identification number and/or student date of birth for the records included in this file.

Signature of Certifying Officer

Print Name

Print Title

Date of Submission

If delivered via FTP

Filename _____

Record Number _____

Date _____