

Form may be submitted via fax 714-992-9599 · Mail 315 E Wilshire Ave, Fullerton, CA 92832

GENDER DESIGNATION

0	Cisgender
0B	Non- binary gender and cisgender
1	Transgender
1B	Non-binary gender and transgender
2	Declined to state
2B	Non-binary gender and declined transgender
B	Non-Binary gender

PERSONAL PRONOUN

01	She, her, hers
02	He, him, his
03	They, them, theirs
04	Ze, hir

By signing your name on the signature line below, you are validating all of the information you have provided on this form to be true and accurate.

STUDENT'S SIGNATURE

DATE

OFFICE USE ONLY

Type of ID: _____ Date Rec'd: _____ Accepted By: _____ Date Updated in Banner: _____ Updated By: _____

SPAIDEN: Is ADDRESS type "DM/CO"? NO _ YES _ (If yes to this question, keep a copy and send original to HR).

Original: Wilshire
 Updated 4/2025