Office of the Registrar

Legal Name Change Form

I, ________________________________, Student ID # ___________________

Request that my name be changed on my student records as follows:

From:

__________________________

Last                   First                  Middle Initial

To:

__________________________

Last                   First                  Middle Initial

Document:  _____ Marriage License  _____ Naturalization  _____ Court Document

Signature: ___________________________ Date: ________

For use by the Office of the Registrar:

Verified Original Document: _________ Date: _______

Date Entered into the Student Information System: ________ By: _______________________

8/2011