



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

Please know we cannot accept name change documentation electronically as original documentation must be verified. If you are not able to complete the name change in person, you can send this form along with a notarized copy of the legal document indicating your name change to Student Services 419 Boston Avenue Medford, MA 02155.

Additionally, please be advised that name changes will be effective for current or future enrollments. Few exceptions are made to retroactively change a legal name for alumnae or students no longer in attendance.

Signature: _____ Date: _____

For use by the Office of the Registrar:

Verified Original Document: _____ Date: _____

Date Entered into the Student Information System: _____ By: _____