OFFICE OF THE REGISTRAR

# Name Change Request

**This form can be filled out with Adobe Acrobat and then printed for signatures.**
***(Must be accompanied by acceptable legal documentation as defined below.)***

..... / /
**UIN** **Date of Birth**

..... ..... .....
**MAJOR** **CLASSIFICATION** **Expected or actual graduation Date**

## CHANGE NAME TO: (Please type EXACTLY as you wish it to appear)

.....
**Last Name** **First Name** **Middle Name**

## FROM:

.....
**Last Name** **First Name** **Middle Name**

**REASON FOR CHANGE:**

☐ **Marriage** ☐ **Divorce** ☐ **Court order/naturalization** ☐ **Misspelling**

## MAILING ADDRESS:

..... .....
**Street or P.O. Box** **Phone Number**

.....
**City, State, Zip Code**

** I have read the Guidelines for Changing the Name on Official Records. I understand that the new name will appear on all official University records and on my diploma. I also understand that I may not make additional changes to my name without new legal documentation demonstrating that my name has been substantially altered for one of the reasons shown above.*

.....
**Signature** **Date**

## For Records Office use only

**Date Changed in:** .....**SIMS** .....**Data Search Files** .....**Permanent Record/film**

**Date Change Sent to:** .....**Dean** .....**Department** .....**Student**

**Documentation Received:**

☐ **Marriage License** ☐ **Naturalization Certificate**
☐ **Divorce Decree** ☐ **Court Order**
☐ **Birth Certificate** ☐ **Passport**
☐ **Driver's License (for minor changes only, such as misspelling)**

Reset Form