



# Name Change Request

## 453.15

**Instructions:** This form is for undergraduate or graduate students who wish to request a legal name change. Please print and return completed form with a copy of a legal document showing the official name change to the Registrar's office. Legal documents may include a social security card, driver's license, passport, or other state issued ID.

Please Print Clearly

Name: \_\_\_\_\_ Student ID Number (last 5 digits): \_\_\_\_\_

Advisor: \_\_\_\_\_ Degree: \_\_\_\_\_

Semester: \_\_\_\_\_

New Name: \_\_\_\_\_

### Required Signatures (must be signed in the following order):

Student:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Registrar:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### OFFICE USE ONLY

Entered in CAMS: \_\_\_\_\_ Date: \_\_\_\_\_

Email Notification to Student Accounts, Financial Aid, and Student Services: \_\_\_\_\_ Date: \_\_\_\_\_

Request Student Login and Email Address Updates: \_\_\_\_\_ Date: \_\_\_\_\_