CRISWELL COLLEGE

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 (a marriage license is not sufficient documentation).

Please Print Clearly

Name: _____ Student ID Number: _____

Semester: _____

New Name: _____

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

Student: _____
Signature Date

Registrar: _____
Signature Date

OFFICE USE ONLY

Entered in SONIS: _____ Date: _____

Email Notification to all staff in Student Accounts, Financial Aid, Student Services, and Library.Include Campus Software Manager,

IDChange@criswell.edu, **other Registrar's Office staff, and VP of Student Affairs (for international students only) :** _____ **Date:** _____