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*(Documentation that must be attached to this form is an updated social security card and marriage license, divorce certificate, or other court sealed document.)*

Student's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Effective Date: \_\_\_\_\_

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I request that my name be changed to \_\_\_\_\_ due to

\_\_\_\_\_.

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Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Registrar Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Financial Aid Signature: \_\_\_\_\_

Date: \_\_\_\_\_