



## STUDENT NAME CHANGE FORM

**Instructions:** Please fill out the form in **Blue or Black pen**, print it, **sign it**, and send it to the **Records Office**.

Student ID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Month Day Year

**NEW NAME:** \_\_\_\_\_  
Last First Middle

Former Name: \_\_\_\_\_  
Last First Middle

Current Address: \_\_\_\_\_  
Address City State Zip

Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Special Note: If you are receiving student financial aid, you must change financial aid records through the Student Financial Aid Office.

In order to change your name on your official student records, we will need a copy of **one\*** of the following items:

- Certified Court Order granting name change
- Marriage Certificate
- Passport
- Driver's License
- Permanent Resident Card

**\*Your NEW name must appear on any documents that you submit in support of your request.**

I request that my name be changed in official school records in accordance with the College of Southern Idaho's policy and this form:

\_\_\_\_\_  
Signature Date

**Office Use Only:**

Processed by: \_\_\_\_\_ Date: \_\_\_\_\_  
 Revised 07/16/15