SDSU Change of Name Form

RedID _____

YOU MUST BE CURRENTLY ENROLLED TO SUBMIT THIS FORM.

| Former Name | Last | First | Middle |
|------------------|-----------------------|-------|--|
| New Name | Last | First | Middle |
| Graduate Student | Undergraduate Student | | FOR OFFICE USE Record Initials Folder Date |
| | uation? | | Index Extension Record Microfilm Cross Reference Special Program |

Change of Name Procedure

- 1. Fill out and sign form.
- 2. Students graduating at the end of the current semester should notify their graduation adviser to change their name on the diploma.
- 3. THIS FORM CHANGES YOUR NAME WITH THE OFFICE OF THE REGISTRAR ONLY. If you receive financial aid or other form of assistance, you must notify that office of your name change.

Student's Statement

I declare that the information provided is true and correct and that this change of name will not be used for fraudulent purposes and represents a bona fide change in the sense that it is to be, or has been used, consistently. I also understand that this change will not remove former names from the permanent record.

| Date | / | _/ |
|------|----------|-------|
| | (MM / DD | / YY) |

Signature

(REQUIRED) Form is not valid without signature.

| N | NAME CHANGES: | | |
|---|--|--|--|
| I | Bring the following documentation showing your new name to the SDSU Office of the Registrar: | | |
| | Original signed Social Security card. | | |
| | Driver's license (If you are not a United States citizen, you must show a valid passport and photo ID reflecting the new name.) | | |
| | Notify your instructors of your name change to avoid grading discrepancies. You only need to do this if you are changing your name mid-semester. | | |
| | Look for your new and former names on your SDSU transcript. | | |