



Change of Name/Address

Banner ID / Social Security Number: _____

Name (Currently on File): _____

Did you apply for graduation? Yes No

Are you an International Student Yes No

New Name (If Applicable): _____

New Address: _____

Telephone Number: () _____ Cell Phone: () _____

**** Completion of Emergency Contact information is optional, except for Residence Hall students****

Emergency Contact Name: _____ Relationship: _____

Emergency Contact Phone #1: _____ Phone #2: _____

Emergency Contact Address: _____

OFFICE USE ONLY

Documentation Submitted for name change (please circle all that apply):

Marriage Certificate Divorce Decree Government Issued ID Other: _____

Processed By: _____ Date Processed: _____