

Request for Change of Name

In order to petition for a change of name you must complete this form and provide your signature below. **Supporting documentation is required.** Please allow 2-3 business days for processing.

Student Information:

Current University ID #: _____
Birth Date (MM/DD/YYYY) _____
Former Name: _____
 First: _____
 Middle: _____
 Last: _____
New Name: _____
 First: _____
 Middle: _____
 Last: _____
Reason For Name Change: _____

How can we reach you if we have questions?

Email Address: _____
Daytime Phone: _____

Student Signature: _____ Date: _____

Supporting Documentation:

- **Updated Indiana Driver's License** – If a student has a current/updated Indiana Driver's License reflecting his/her new name, only the Indiana Driver's License is required in order to make a name change.
- **For all other situations** – A copy of legal documentation, such as a copy of a social security card (only if submitting by mail; do not fax the SSN card), copy of a marriage certificate, or official court document that supports the name change along with a photocopy of the student's driver's license, state id, or other acceptable form of photo id which displays the birthdate is required.

Return this completed form and supporting documentation to:

Office of the Registrar
Campus Center, Suite 250
420 University Boulevard
Indianapolis, Indiana 46202-5144
Fax: 317-278-2240