Name Change Request

Mail to:
Registrar’s Office, Student Services Building 0251, Mailcode 4701, Carbondale, IL 62901
Phone 618-453-2999; Fax 618-453-2915

If you have already completed an APPLICATION FOR GRADUATION you must check this box so that we know to check the name we have entered, that will appear on your diploma. (The name on the diploma must be your new name or a variation of your new and/or past names that we have on file for you; it cannot be a name that we do not have in our records).

Please change my name as follows:

From
First Name ___________________________ Middle Name ___________________________ Last Name ___________________________

To:
First Name ___________________________ Middle Name ___________________________ Last Name ___________________________

For the following reason(s):
Married on: ___________________________
Divorced on: ___________________________
Court Action/Order: (State Specific Reason)
________________________

OFFICIAL DOCUMENTATION AND VALID IDENTIFICATION MUST BE PRESENTED WITH REQUEST

Acceptable forms of ID include state issued picture ID and one of the following:

Marriage Certificate
Divorce Decree
Court Order
Birth Certificate
Passport (for international students)

I certify that the above statements are correct and complete and that there is no intent on my part to defraud. I further state that the name currently on record and the name requested are for one and the same person.

Dawg Tag: ___________________________
Student Signature: ___________________________

For International Student Only:

Signature of International Programs/International Admissions ___________________________

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Student Services Building room 0251 Southern Illinois University Carbondale
1263 Lincoln Drive Carbondale, Illinois 62901 Mail Code 4701 618| 453-2911 Fax: 618|453-2915