



**Southern**  
 Illinois University  
**Carbondale**

## NAME CHANGE REQUEST

Office of Records and Registration, Woody Hall A-103, Mailcode 4701, Carbondale, IL 62901  
 Phone 618-453-2999; Fax 618-453-2915

\*NOTE: 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:  Married on \_\_\_\_\_ Date  Divorced on \_\_\_\_\_ Date  
 Court Action/Other: (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 Number \_\_\_\_\_

Student Signature \_\_\_\_\_

For International Students Only:

\_\_\_\_\_  
 Signature of International Programs/International Admissions