



Student Name and/or Gender Change Form

Name As It Currently Appears In Our Records:

First Name: _____

Middle Name: _____

Last Name: _____

Date of Birth: ____/____/____

New Name:

First Name: _____

Middle Name: _____

Last Name: _____

Student wishes to Change Gender Marker	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Current Gender Marker	<input type="checkbox"/> M	Change To:	<input type="checkbox"/> M
	<input type="checkbox"/> F		<input type="checkbox"/> F
	<input type="checkbox"/> X		<input type="checkbox"/> X

Signature: _____

Date: ____/____/____

Required: You must submit a copy of a legal form of identification which displays your new name. Appropriate documentation includes social security card, a valid passport, driver's license, or court order.

Processed by Registrar Date: ____/____/____

