Name Change Form

The Registrar’s Office will process name changes for currently enrolled students only.

As of (date) __________, I request that my name be changed on my official University of Richmond records as follows:

Please print clearly.

From (Previous Name): ______________________________________________________________
First                                  Middle                                                Last

To (New Name): ___________________________________________________________________
First                                  Middle                                                Last

Graduate Year: __________

Date of Birth (MM/DD/YYYY): ________________

Student ID Number: ______________________ (8-digit University ID number)

For Reason of: _____________________________________________________________________________
(Marriage, court order, or specific other)

Please provide the following documentation:

1. A certified copy of a marriage certificate, court order, or dissolution decree reflecting the new name in full;

2. An updated Social Security Card, Driver’s License, Passport, Government or Military I.D.

I fully understand, and aware of, possible complications that may occur from this change and, therefore, do not and will not hold University of Richmond liable in any way. I also understand that the Office of the University Registrar at University of Richmond will notify the appropriate University of Richmond departments of this change, but it is my responsibility to notify any instructors of courses in which I am currently enrolled.

Signed: __________________________________________ Date: ______________________

For Office Use Only:

Initials: ______ Date: ______

Copy of documentation attached (required): _____ (please check)

8/2014