



Student Change of Name

DATE: _____

STUDENT ID: _____

DATE OF BIRTH: _____

FORMER NAME

LAST: _____ FIRST: _____ MIDDLE: _____

NEW NAME

LAST: _____ FIRST: _____ MIDDLE: _____

EVIDENCE SUBMITTED: _____
Driver's license, certificate (marriage/court order)

CURRENT ADDRESS

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: () _____ - _____ CELL PHONE: () _____ - _____

E-MAIL ADDRESS: _____

STUDENT SIGNATURE

DATE

I WISH TO HAVE MY DELAWARE VALLEY LOG ON CHANGED TO REFLECT MY CHANGE OF NAME: _____

Please be aware that changing your name in the registrar's office will not change your name in the payroll system. If you are a University employee please visit Human Resources to change your payroll information.

OFFICE OF THE REGISTRAR USE ONLY

ENTERED BY: _____

DATE: _____

DISTRIBUTED: _____