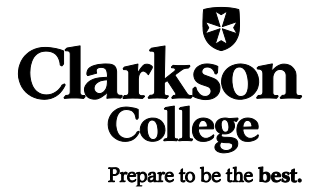


Name Change Request



Directions: Complete form and return to the Registrar’s Office along with a copy of the official document confirming the name change. Please note that **no change will be made without required documentation.** It is also the student’s responsibility to inform instructors of any name change. Also, if you are a student worker, please contact HR with your name change. **Name changes will not be accepted during the graduating semester. They must be submitted by the first day of the graduating term.**

STUDENT INFORMATION

PROGRAM OF STUDY _____	STUDENT ID NUMBER _____	
Previous name: _____		
LAST	FIRST	MI
New name: _____		
LAST	FIRST	MI

Required documentation Only one is necessary.

- Copy of marriage certificate
- Copy of court document with new name
- Copy of social security card
- Original naturalization certificate
- Copy of legal document restoring maiden name
- Copy of driver’s license

SIGNATURE _____	DATE _____
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IMPORTANT: Please contact our IT department for any information regarding your Office 365 login.

CONTACT

Clarkson College Registrar’s Office
101 South 42nd Street Omaha, NE 68131-2739
PH 402 552 3033 TF 800 647 5500 FX 402 552 6165
registrar@clarksoncollege.edu

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