

# OFFICE OF THE UNIVERSITY REGISTRAR

## CHANGE OF NAME REQUEST FORM

Use this form to request changes, due to incorrect spelling or legal situations, to the primary name under which your UDSIS education record is listed. If you have any questions, contact Registrar at (302) 831-2131.

### Instructions:

1. Complete this form in its entirety.
2. **Click 'Finish & Save' to save/download PDF.**
3. Provide legal documentation of the new name: copy of driver's license or other proper documentation, such as passport, state or national-issued identification card or court order of legal name change. Our office will not consider a marriage certificate for a name change request.
4. The person requesting the name change (not a 3rd party) should upload the Change of Name Request form and your documentation via this secure link:
5. Processing time is typically 10 business days after our receipt of this form.

Your UDID: \_\_\_\_\_ (if known, otherwise leave blank. This is NOT your social security#)

\*Date of Birth: \_\_\_\_\_ (use format mm/dd/yyyy)

Gender:            Female            Male            Other Gender

Currently Attending UD?:            Yes            No

Full Name while at UD:

### \*New Name Information

**First:**

**Middle:**


**Last:**

Reason for Change:

Graduation Date:

Phone Number:

\*Signature: \_\_\_\_\_ Date: \_\_\_\_\_

 Use the *Draw Freehand* tool to make your signature.