R·I·T
Rochester Institute of Technology
Office of the Registrar
Eastman Hall (EAS), Room 1202
Phone 585/475-2821
Fax 585/475-7005

Change of Name

Instructions

This form should be used by a student who has changed his/her name and needs to update information in their official student record. In order to proceed with a name change, the student must provide a current photo ID and legal documentation as indicated on this form.

General Information

Please Type

University ID Number ___ ___ ___ ___ ___ ___ ___ ___ ___

Name _____ _____ _____ _____
(Current) First Middle Last Suffix

Academic Program _____ **Academic Plan** _____

Home Address

Number and Street _____
City/State/Zip _____
Province/Postal Code _____
Country of Origin _____ State of Permanent Residence _____

Contact Phone and E-mail Information

Day _____/_____-_____ Cell _____/_____-_____ E-mail _____

Name Change Information

Name _____ _____ _____ _____
(New) First Middle Last Suffix

Reason for Change

Are you a current student? ❑ **yes** ❑ **no**

Should we update preferred name? ❑ **yes** ❑ **no**

Are you an international student? ❑ **yes** ❑ **no**

If yes, what is your visa type? ❑ **F** ❑ **J** ❑ **other, please list** _____

Student Signature _____ **Date** _____

Proof Presented for Change

Please provide **a copy** of one type of documentation **from each of the two areas.**

AREA 1

- ❑ **birth certificate**
- ❑ **marriage certificate**
- ❑ **divorce decree**
- ❑ **court order**

AREA 2

- ❑ **driver's license**
- ❑ **international passport**
- ❑ **U.S. passport**
- ❑ **naturalization papers**

Registrar's Office Use Only

Date Received _____

Date Processed _____

Processed by _____

Distribution: *Copies will be forwarded to the student's Department, Financial Aid, International Student Services.*