



## Name Change Request

Mail to:

Registrar's Office, Student Services Building 0251, Mailcode 4701, Carbondale, IL 62901  
 Phone 618-453-2993; Fax 618-453-2915

If you have already completed an **APPLICATION FOR GRADUATION** you must check this box so that we know to check the name we have entered, that will appear on your diploma. (The name on the  diploma must be your new name or a variation of your new and/or past names that we have on file for you; it cannot be a name that we do not have in our records).

**Please change my name as follows:**

From \_\_\_\_\_  
 First Name Middle Name Last Name

To: \_\_\_\_\_  
 First Name Middle Name Last Name

**For the following reason(s):** Married on: \_\_\_\_\_ Divorced on: \_\_\_\_\_  
 Court Action/Order: (State Specific Reason) \_\_\_\_\_

**OFFICIAL DOCUMENTATION AND VALID IDENTIFICATION  
 MUST BE PRESENTED WITH REQUEST**

Acceptable forms of ID include state issued picture ID **and** one of the following:

- Marriage Certificate
- Divorce Decree
- Court Order
- Birth Certificate
- Passport (for international students)

I certify that the above statements are correct and complete and that there is no intent on my part to defraud. I further state that the name currently on record and the name requested are for one and the same person.

Dawg Tag: \_\_\_\_\_

Student Signature: \_\_\_\_\_

For International Student Only:

\_\_\_\_\_  
 Signature of International Programs/International Admissions