



Name Change Request Form

This form can be filled out then printed for signatures. **Name Change request must be accompanied by acceptable legal documentation as defined below.** Any questions may be directed to the Office of Records or records@qatar.tamu.edu

UIN: _____ Date of Birth (mm/dd/yy): _____

Major: _____ Class: _____ Graduation Date: _____
(Expected or actual)

CHANGE NAME TO: (Please type name exactly as you wish it to appear)

LAST/FAMILY NAME FIRST NAME MIDDLE NAME/INITIAL

FROM: _____
LAST/FAMILY NAME FIRST NAME MIDDLE NAME/INITIAL

Reason for Change: Marriage Divorce Court order/naturalization Misspelling

E-mail Address (to send confirmation of name change):

E-mail

** I have read the Guidelines for Changing the Name on Official Records. I understand that the new name will appear on all official University records and on my diploma. I also understand that I may not make additional changes to my name without new legal documentation demonstrating that my name has been substantially altered for one of the reasons shown above.*

Signature: _____ **Date:** _____

For Office of Records Use Only

Date Changed in: Compass _____ Data Search files _____ Permanent record/film _____

Date Change Sent to: Dean _____ Department _____ Student _____

Documentation Received:

- _____ Marriage license
- _____ Divorce decree
- _____ Birth certificate
- _____ United States Driver's license (for minor changes only, such as misspellings)
- _____ United States Naturalization Certificate
- _____ Court order
- _____ Passport