

Name and/or Social Security Number Change Request

UM ID: _____

Please change my name as follows:

From: _____
First Name Middle Name Last Name

To: _____
First Name Middle Name Last Name

Date of official change: _____

Have you submitted a graduation application? ___ Yes ___ No If yes, should your new name appear on your diploma? ___ Yes ___ No

OFFICIAL DOCUMENTATION AND VALID IDENTIFICATION MUST BE PRESENTED WITH REQUEST

****Documentation must reflect the new name****

Acceptable forms of ID include state-issued picture ID **and one** of the following:
Marriage Certificate
Divorce Decree
Court Order
Social Security Card
Birth Certificate
Passport (for international students)

Please change my social security number as follows:

Note: Social Security card **and** state-issued picture ID are required with this request.

New Social Security Number: ____ - ____ - ____

I certify that the above statements are correct and complete. I further state that the name currently on record and the name requested are for one and the same person.

UM ID: _____

Student Signature: _____ Date: _____

Note: If you are mailing the information, all the required documentation pertaining to your request must be notarized copies. Faxes are not acceptable.

Registrar's Office use only
Completed by: _____ Date: _____