



THE UNIVERSITY of  
**MISSISSIPPI**  
OFFICE OF THE REGISTRAR

***REQUEST FOR CHANGE OF NAME ON UNIVERSITY OF MISSISSIPPI RECORDS***

This information is being requested for the purpose of enabling The University of Mississippi to accurately identify your records. (The university does not assume responsibility for verifying the legality of using of any name by a current or former student.)

Documentation must be presented to indicate that the name as it is requested appears on at least two legal records. Suggested documents include social security card, driver's license, passport, court decree, or birth/marriage certificate. (If this name change request form is being mailed, certified copies of two supporting documents should be attached to this request.)

**Please print or type:**

**Full name as it currently appears on University of Mississippi records**

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle

\_\_\_\_\_  
Last name

**Full name as you wish it to appear on University of Mississippi records (No initials, please)**

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle

\_\_\_\_\_  
Last name

\_\_\_\_\_  
Student ID Number or SSN

\_\_\_\_\_  
Date of Birth (Month/Day/Year)

\_\_\_\_\_  
Phone

\_\_\_\_\_  
E-mail

**Reason for Name Change:**

Marriage  Divorced  Other \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**