

Change of name

Date	Erikson ID		
Previous name			
	Last	First	Middle initial
New name			
	Last	First	Middle initial

This change of name is being submitted based on the following:

- Legal name change
- Update/change in marital status
- Update/change in gender
- Correction of existing name

This form must be accompanied by a copy of one document from List A and one document from List B:

List A (submit copy of 1 document)

- Driver's license
- State ID card
- Social security card with signature

List B (submit copy of 1 document)

- Marriage license
- Divorce decree
- Court order

I authorize Erikson Institute to update my personal information per this request. I verify that all documentation and identification presented is current and accurate.

Signature

Date

For Registration and Student Records Office only

Date received _____ Staff initials _____