



REQUEST *for* NAME CHANGE

Document# _____	Initials _____
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UC IRVINE • UNIVERSITY REGISTRAR

Current name on UCI records (last,first,middle) _____

Student ID number _____

School _____

Major _____

FR SO JR SR GR

Level _____

I certify that the information provided on this form is true and request my name be changed on UCI records to:

Last _____

First _____

Middle _____

Student Signature _____

Date _____

The University maintains your records under your full legal name. Strong evidence is required to establish a link between you and the record being changed. **If you wish to change your name you must provide the Registrar's Office with the following required supporting documents:**

Documentation showing your name as it currently appears on your UCI records (picture ID is preferred; birth certificate or social security card is acceptable)

AND one of the following pertaining to your personal circumstances:

Marriage:

- copy of marriage certificate, OR
- license and certificate of marriage, OR
- license and certificate of confidential marriage, OR
- certified abstract of marriage

Dissolution of Marriage:

- copy of dissolution of marriage judgment with maiden name restored

Court Order:

- copy of court order

Naturalization (both are required):

- copy of naturalization certificate and
- USCIS Petition for Name Change

Usage:

- documentation that you are using your new name to transact business with both state and federal agencies (**both are required**)
- valid state issued driver license, or state issued ID card with new name; and
 - social security card with new name; and
 - documentation that "links" your current and new name.

For Registrar's Office Use Only

S005 Name Change

S008 Name Correction

Effective Date: _____

Last _____

First _____

Middle _____