College of Southern Idaho
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STUDENT NAME CHANGE FORM

Instructions: Please fill out the form, print it, **sign it**, and send it to the **Records Office**.

NEW NAME: _____
LAST FIRST MIDDLE

Former Name: _____
LAST FIRST MIDDLE

Student ID: _____ Date of Birth: _____
Month Day Year

Special Note: If you are receiving student financial aid, you must change financial aid records through the Student Financial Aid Office.

In order to change your name on your official student records, we will need a copy of **one*** of the following items:

- ☐Certified Court Order granting name change
- ☐Marriage Certificate
- ☐Passport
- ☐Driver's License
- ☐Permanent Resident Card

***Your NEW name must appear on any documents that you submit in support of your request.**

I request that my name be changed in official school records in accordance with the College of Southern Idaho's policy and this form:

_____ _____
Signature Date

Admissions and Records Office Use Only:

Processed by:_____ Date:_____