

MOREHEAD STATE UNIVERSITY
OFFICE OF THE REGISTRAR
201 GINGER HALL
MOREHEAD, KY 40351
606-783-2008
registrar@moreheadstate.edu

PREFERRED NAME REQUEST FORM

I would like to request that my preferred first name be displayed on class rosters. I understand that my legal name will continue to be listed on all official documents (i.e. transcript, diploma). Preferred name changes are for first name only.

MSU ID # _____

Legal Name

Last Name _____ First Name _____ Middle Name _____

Preferred First Name

I would like to request that my preferred first name be displayed on class rosters as:

Requests for a preferred first name may be denied if an inappropriate name is requested.

I assume responsibility for any consequences or problems that may occur as a result of this change. There is no intent on my part to defraud Morehead State University or any other entity.

Signature _____

Date _____