



Name Change Form

Date: _____

	Last	First	Middle	Maiden
New Name				
Previous Name				

Reason for Change:

Married: _____
Date

Divorced: _____
Date

Court Action/Other (please specify):

Contact Information:

MSU ID #: _____

Date of Birth: _____

Social Security Number: _____

Are you a current student?: YES ____ No ____

If not a current student, list last date of attendance: _____

You must submit at least two of the following documents in order for our office to process your request:

- *Social Security Card
- *Marriage Certificate
- *Divorce Decree
- *Court Order
- *Driver's License
- *Passport

Signature: _____ Date: _____

Note: If you have already applied for graduation, please email graduation@moreheadstate.edu if you wish to change the name that will appear on your diploma.