

Name/Address Change

Current Name _____

Last First MI

Student ID# @

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 DOB:

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MM DD YY

Social Security #

X	X	X	X	X					
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(Not required if Student ID# provided above.)

▶ Official Name Change *

* **Must be submitted in person to the Records Office with the following:**

1. **Official Photo Identification with new name (Drivers License, State of Connecticut ID card or passport)**
- AND**
2. **a Certified Copy of ONE of the following showing the new name:**
 - **Probate Court Decree ordering a name change**
 - **Superior Court Order dissolving a marriage and explicitly ordering restoration of the name of a party**
 - **District Court Order associated with an immigrant becoming a U.S. Citizen**
 - **Marriage License**

NEW Name _____

Last First MI

Student's Signature _____ Date _____

► Address Change

Name

Last

First

MI

NEW Address (street) _____

City/State/Zip Code _____

Home

Phone Number

() _____

Day Time

Phone Number

() _____

Email Address _____

Student's Signature _____

Date _____

FOR OFFICIAL USE ONLY:

Date Received: _____ Date Entered: _____ By: _____