



# REQUEST FOR NAME CHANGE ON OFFICIAL UNIVERSITY RECORD

To change Preferred Name only, please visit forms for [Employees](#) and/or [Students](#).

**ALL NAME CHANGES REQUIRE A COPY OF ONE OF THE FOLLOWING SUPPORTING DOCUMENTS:**  
[ Social Security Card ] • [ Driver's License ] • [ Court Order ]  
[ Birth Certificate ] • [ International Passport ] • [ Resident Alien Papers ]

U-Number (if known): U \_\_\_\_\_ SSN#: XXX - XX - \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Daytime Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Check ALL Roles that apply. Submit completed form and documentation to the office by the first Role checked.**

**EMPLOYEE (Faculty/Administrator/Staff):** Current Former | Dept: \_\_\_\_\_  
Submit to: Human Resources, 165 Administration Bldg, Memphis, TN 38152-3370  
FAX: 901.678.1364 (Questions? Call: 901.678.3573)

**STUDENT:** Current GA/Std Worker Former Std/Not Grad – Last Term Attended: \_\_\_\_\_  
Submit to: Registrar secure upload: <https://securefile.memphis.edu/form/rsu>  
003 Wilder Tower, Memphis, TN 38152-3520 (Questions? Call: 901.678.2810)

**UofM ALUMNI – Graduate of UofM:** Year Graduated - \_\_\_\_\_  
Submit to: Billy Mac Jones Bldg, 633 Normal Street, Memphis, TN 38152-3760  
FAX: 901.678.5215 (Questions? Call: 901.678.2987)

**OTHER (Use only if no other role applies – e.g., friend/donor).** Submit to: Same as UofM Alumni.

**Your Name as Currently listed on your UofM Record:**

<b>First:</b>		<b>Prefix:</b>	
<b>Middle / Maiden:</b>			
<b>Last:</b>		<b>Suffix:</b>	

**Your Name exactly as it Should Appear and as supported by your Documents:**

<b>First:</b>		<b>Prefix:</b>	
<b>Middle / Maiden:</b>			
<b>Last:</b>		<b>Suffix:</b>	

**Reason for Name Change (if marital status change, please indicate new status):**

**CURRENTLY ENROLLED STUDENTS:** You must notify your instructors of your name change.

**FINANCIAL AID APPLICANTS/RECIPIENTS:** I understand that I cannot change my legal name as it appears on my birth certificate and/or with the Social Security Administration without supporting legal documents. If I do not have the necessary legal documents, then I forfeit my rights to any current or future financial aid disbursement. I understand that my name on my Official University record and my legal name must match in order for me to receive financial aid.

*I assume responsibility for the consequences or problems that may occur as a result of this change of my name. It is not my intent to defraud the University of Memphis.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*For Office Use Only*

Office Processing Change: \_\_\_\_\_ By: \_\_\_\_\_  
Phone: \_\_\_\_\_ Date: \_\_\_\_\_  
Doc Type/Doc ID: \_\_\_\_\_ / \_\_\_\_\_