

## Name Change Request

Office of the Registrar 120 N. Clovis Avenue Clovis, CA 93612

## Use this form for: Legal Name Changes

In-person requires this form with all original documents required. Mailed requests require copies of your documents mailed to the address listed above

Current Name on Record: List the name that cu	rrently annears on your CHSU reco	rds
	memby appears on your crise sees	
Last Name	First Name	Middle Name or Initial
SONIS Student ID:	Email:	
New Name on Record:		
Last Name	First Name	Middle Name or Initial
In order to process your Legal Name Chang documents accepted by CHSU must be incl		ID card and one of the following official
Official Documents accepted by CHSU inc	clude the following:	
☐ Valid, unexpired driver's license	☐ Passport	
☐ Applicable court document	☐ Marriage Cer	
☐ Social Security Card	☐ U.S. Governm	nent ID card
LEGAL NAME CHANGE – Provide us w	ith:	
Your current CHSU ID card and		
Copy of an official document indicating a name on your CHSU records must match		
☐ Certified copy of an official gover		
☐ Legal name change decree – US o	•	ed
<ul><li>Divorce decree – US city, county,</li><li>Typographical Error – please prov</li></ul>		ued identification document
	nae a carreire government issu	dea racritimeation abeament.
<b>Certification:</b> By signing below, I request that CHSU change my studocuments to support this change.	ident records to match the new infor	mation listed above. I have included all required
Student Signature	 Date	
Please note: After graduation, no name o	change will be made to your academic	record unless you re-enroll at CHSU.
	For Office of Registrar Use Only	
Date Received: Rec	ceived By:	