

STUDENT LEGAL NAME CHANGE/CORRECTION REQUEST

CURRENTLY ENROLLED STUDENTS

A currently enrolled student may change the name on his or her permanent academic record by presenting a signed Legal Name Change/Correction Request form along with the following appropriate original documentation to the Office of the Registrar. All forms used for Personal Information Updates must be completed in blue or black ink and may not contain any scribbled or marked out data.

- To correct the spelling, punctuation, capitalization, middle initial, full middle name or the proper sequence of the name requires:
 - *valid state or U.S. government issued photo identification AND
 - o the original or *notarized copy of the student's birth certificate OR
 - the original or *notarized copy of social security card OR
 - o the original **or** a *notarized copy of valid passport and/or visa.
- To change the name requires:
 - *valid state or U.S. government issued photo identification AND
 - o the original **or** a certified true copy of the signed court order showing current and new name with raised or ink seal showing the new legal name.
- To assume the spouse's name following marriage requires:
 - *valid state or U.S. government issued photo identification AND
 - o the original or a *notarized copy of the marriage certificate AND
 - o the original **or** a *notarized copy of the updated social security card.
- To discontinue use of the married name and resume use of the original family name, or another name requires:
 - *valid state or U.S. government issued photo identification AND
 - o the original **or** a *notarized copy of the divorce decree **or** a certified true copy of the signed court order with raised or ink seal showing restoration of the original or other name.

*NOTE: All copies must be notarized by a commissioned notary and accompanied by the affidavit included with the Legal Name Change/Correction Request form. Color copies of documentation are preferred. While notarized copies are accepted for specific situations listed above, the College of Charleston reserves the right to demand production of a certified original or color copies at the sole discretion of the University Registrar (or University Registrar's designee). All requests may be subject to review by the Office of Legal Affairs (OLA).

FORMER STUDENTS

The College of Charleston maintains student records under the name the student had when last enrolled. A former student/alumni may not change the name on his or her permanent academic record except by presenting valid state or U.S. government issued photo identification, a signed Legal Name Change/Correction Request form, **and** a certified true copy of the signed court order with raised or ink seal showing the authorized name change.

NOTICE: Identification theft is taken seriously by the College of Charleston and will be prosecuted to the fullest extent available under law. Completed forms and documentation must be submitted in person by the individual requesting the change or via postal mail, no exceptions. The College of Charleston reserves the right to request further evidence to authenticate identity for all legal name change or correction requests.



STUDENT LEGAL NAME CHANGE/CORRECTION REQUEST

Student Status						
I am a currently enrolled student. I am a former student.						
As of [date MM/DD/YYYY], I hereby request that my legal name be changed on my official College of Charleston records as follows:						
Legal Name Currently on File with the Office						
Last	First		1iddle Name or Initial			
New or Corrected Legal Name to be Filed with the Office of the Registrar (please print clearly)						
Last	First		Middle Name or Initial			
CofC ID (CWID)	OR –	Social Security Number (Las	st 4 Digits)			
Reason for Request (correction, marriage,	divorce, court or	der, specified other; this field	d may not be left blank)			
Student Contact Information						
Email Address (current students must use their colle	ge-issued email)	Daytime Phone Number				
,	,					
By my signature below, I hereby attest and ce						
Change/Correction Request is correct and co- evidence to authenticate my identity or require						
evidence to authenticate my identity or require production of a certified original of a document at the sole discretion of the University Registrar (or University Registrar's designee).						
Signature		Date (MM/DD/YYYY)				
DO OFFICE LISE ONLY		□Passport/Visa Exp	oiration:/			
RO OFFICE USE ONLY Documentation Provided (check all that apply)		☐ Birth Certificate				
□ Valid photo ID	11					
valid photo เป SSN Card		\square Notary commission	n validated			
□ SSN Card SSN Card and Marriage Certificate						
□SSN Card and Marriage Certificate □Court Order		Approved by: (RO Official Initials)				
□ Divorce Decree		Processed by:	(RO Staff Initials) Date://			

AFFIDAVIT

State of			
County of			
On this day of	, 20, I, (Name of Docu	uments), consisting of	_(<i>Document Holder</i>), holder of pages, do hereby swear/affirm,
and attest that it is a true, exact, complete the photocopied document is not a public r	•		-
			Signature of Affiant
Sworn to (or affirmed) and subscribed before	ore me this the	_ day of	, 20
			Official Signature of Notary
(Official Seal)			, Notary Public
			Notary's printed or typed name
			County,
			(State)
		1	My commission expires:

*The county listed at the top of the affidavit is the county where the notarization is taking place. The county near the notary's signature is the notary's county of residence.