



THE UNIVERSITY OF
TENNESSEE
KNOXVILLE

OFFICE OF THE
UNIVERSITY REGISTRAR

CHANGE OF NAME REQUEST FORM

Student ID # _____

Former Name

Last First Middle/Maiden

New Name

Last First Middle

Please choose the most appropriate reason for the requested name change below. In order to verify your name change, we require documentation which shows your name as you wish it to appear on your official record. Attach a *readable* photocopy of the required documentation (see below for list of required documentation) and submit to the Office of the University Registrar, 209 Student Services Building or One Stop on the ground floor of Hodges Library.

Reason for Change (choose one)

- Marriage
- Divorce
- Legal Name Change
- Correction to Name*

Document Required for Change to be Made

- Marriage Certificate or Driver's License with new name
- Divorce Decree or Driver's License with new name
- Court Order or Driver's License with new name
- *Requires Driver's License with correct name

Last Term of Attendance: _____

Students who are currently employed (work study program, etc.) by the University of Tennessee, Knoxville must also contact University Payroll, P115 Andy Holt Tower, 865-974-5251, for information about updating their name on their employee record.

Signature _____ Date: _____

Local Address: _____

Mail or FAX to:

The University of Tennessee
Office of the University Registrar
209 Student Services Building
Knoxville, TN 37996-0200
FAX 865-974-2606

RESET

PRINT