



THE UNIVERSITY OF
TENNESSEE
KNOXVILLE

LEGAL NAME CHANGE REQUEST FORM

Student ID # _____

Date of Birth _____

Former Name

Last

First

Middle

New Name

Last

First

Middle

Please choose the most appropriate reason for the name change. We require documentation which shows your legal name as you wish it to appear on your official record. The name on the documentation **must match** the new name entered on this form. Attach a copy of the documentation and submit to One Stop Student Services located on the ground floor of Hodges Library, onestop@utk.edu , or to the Office of the University Registrar, 209 Student Services Bldg.

Reason for Change

Document Required for Change

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

- _____ Marriage License or Driver's License
- _____ Divorce Decree or Driver's License
- _____ Court Order or Driver's License
- _____ Driver's License or Social Security Card

Approximate Last Term of Attendance _____

Students who are currently employed by UTK, including Work Study Program, must also contact Payroll for information about how to update their name on the employee record. The Payroll Office's address is P115 Andy Holt Tower and their phone number is 865-974-5251.

Student signature: _____

Date: _____

Local Address: _____

Phone: _____

UTK email address: _____

**Office of the University Registrar
Enrollment Management**

209 Student Services Building Knoxville, TN 37996-0230
865-974-1111 fax 865-974-2606

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