

Office of the Registrar

Clarkson College

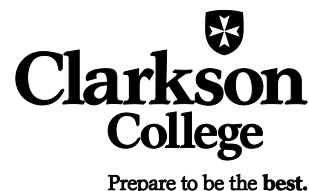
101 S 42nd Street

Omaha NE 68131-2739

Registrar@clarksoncollege.edu

PH 402.552.3033

FX 402.552.6057



Name Change Request

Directions: Complete form and return to the Registrar's Office along with a copy of the official document confirming the name change. Please note that **no change will be made without required documentation**. It is also the student's responsibility to inform instructors of any name change. Also, if you are a student worker, please contact HR with your name change. **Name changes will not be accepted during the graduating semester. They must be submitted by the first day of the graduating term.**

Program of Study: _____ Student ID #: _____

Previous name: _____
Last First MI

New name: _____
Last First MI

Required Documentation (only one is necessary)

- | | |
|---|---|
| <input type="checkbox"/> Copy of Marriage Certificate | <input type="checkbox"/> Original Naturalization Certificate |
| <input type="checkbox"/> Copy of Court Document with New Name | <input type="checkbox"/> Copy of Legal Document Restoring Maiden Name |
| <input type="checkbox"/> Copy of Social Security Card | <input type="checkbox"/> Copy of Driver's License |

IMPORTANT: Please provide your personal email address so you may be contacted once the name change update is made to your account:

Personal email address: _____

Student Signature: _____ Date: _____

Contact our IT department for information regarding your Microsoft 365 Login.