

## NAME AND PREFIX CHANGE REQUEST FORM

Please Print

Current Information:	
Last, First, Middle Name	
Email Address	Davidson ID Number (if known)
Have you worked on campus in the last year?	☐Yes ☐No
New Information:	
Legal Last Name	
Legal First Name	
Legal Middle Name	
Preferred First Name (no documentation requir	ed)
Preferred Prefix (no documentation required)	
For a Legal Name Change please attach:	
☐ A copy of a State or Federally issued photo II	D (passport, driver's license, etc.) showing new name
Or, copies of two of the following:	
☐ Notarized marriage certificate	
Court order documenting legal name change	
☐ Voter registration card	
Social Security card (SSN) showing new name	2
Signature	Date

Registrar's Office
209 Ridge Road
Box 5000
Davidson, NC 28035
704-894-2227
registrar@davidson.edu
www.davidson.edu/registrar