

Student Name (please print) \_\_\_\_\_

UFID Number \_\_\_\_\_

GatorLink E-mail or Personal E-mail \_\_\_\_\_

**Directions:** Please complete this form and bring it in with the specified documents below to the Office of the University Registrar, located in 222 Criser Hall.

If you cannot bring this form in person, submit a legible, **notarized** copy of the documents along with this form via fax to 352-846-1126. Call us at 352-392-1374 about 10 minutes after faxing your documentation to ensure we have received the documents. If you would rather mail the documents, use the physical mailing address listed below.

Office of the University Registrar  
 Attn. Request to Change Official Record  
 PO Box 114000  
 222 Criser Hall  
 Gainesville FL 32611-4000

Documentation provided (you must provide one of the following):

- \_\_\_\_\_ Social Security Card **AND** Driver's License or State Issued ID Card
- \_\_\_\_\_ Passport
- \_\_\_\_\_ Certificate of Naturalization

Bring a copy of your marriage license, divorce decree, or other official government issued name change document with you to the Office of the University Registrar to verify the date the name change was effective.

Date of Event signifying name change: \_\_\_\_\_

**Current Name:**  
 (as on UF records)

\_\_\_\_\_

Last

First

Middle

**Requested Name Change:**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Only 21 characters, including spaces, may be used

I certify that I am the person named above and understand that the Office of the University Registrar will not process my requested name change until the documents I have provided are proven legal and official.

\_\_\_\_\_  
 Student Signature

\_\_\_\_\_  
 Date

**Registrar Staff Use ONLY:**

- \_\_\_\_\_ Verify issue Date of Legal Documents is on or after the name change event
- \_\_\_\_\_ Notarized copy of documentation or copy made by Registrar staff
- \_\_\_\_\_ Name change completed in system