



# Name Change Form

**Return To:**

Academic Records  
112 Shields Building  
University Park, PA 16802  
Fax: 814-863-1929

PSU ID: \_\_\_\_\_ *or* SSN: \_\_\_\_\_

**Name as it currently appears in Penn State's records:**

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_ Suffix: \_\_\_\_\_

**New Name:**

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_ Suffix: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_ Phone Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Two proofs of identification are required:**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Social Security Card ( <b>required</b> if receiving federal or state student aid) |  |  |
| <input type="checkbox"/> Driver's License  | <input type="checkbox"/> Birth Certificate | <input type="checkbox"/> Court Issued Document |
| <input type="checkbox"/> Passport  | <input type="checkbox"/> Marriage License  | <input type="checkbox"/> Divorce Decree        |

Students who are receiving any form of federal or state student aid are required to change their name with the Social Security Administration before changing their name with Penn State.

My signature authorizes the Pennsylvania State University to use this name for all future transactions.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

----- Registrar's Office Use Only -----

**Proof Verified By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Date Entered on ISIS:** \_\_\_\_\_ **Entered By:** \_\_\_\_\_