Request for Name Change

Former Name	New Name
Last Name	Last Name
First Name	First Name
Middle Name	Middle Name
Address Phone Number	
	s required. Please check the box below.
☐ Marriage Certificate ☐ Court	Order
Please Explain the reason for this change	
Signed By	Date
	FOR OFFICE USE ONLY
rocessed/By	Date

Florida Atlantic University Office of Undergraduate Admissions 777 Glades Road, Boca Raton, FL 33431 Phone: (561)297-3040 Fax: (561)-297-2758

Email: admissions@fau.edu