

## Soka University of America Office of the Registrar

## CHANGE OF NAME FORM

## **INSTRUCTIONS:**

- Original proof of <u>NEW</u> name must be provided (we will make a copy)
  Domestic students must provide their social security card with the new
  - o International students must contact the International Student Services office

| Student ID#             |                            | SSN                           |  |
|-------------------------|----------------------------|-------------------------------|--|
| PREVIOUS NAME: Records: | Print your name as it now  | v appears on University       |  |
| LAST                    | FIRST                      | MIDDLE                        |  |
| NEW NAME: Print y       | your new name as it will a | appear on University Records: |  |
| LAST                    | FIRST                      | MIDDLE                        |  |
| Signature: SIGN YO      | DU NEW NAME                | Date                          |  |
| OFF                     | ICE OF THE REGISTRAR       | USE ONLY                      |  |
| Approved and Entered I  | oy:                        |                               |  |

Revised: 10/26/2009 1