



MBU ONLINE

NAME CHANGE REQUEST FORM

MBU ID#: _____

PLEASE CHECK ONE: CURRENT STUDENT

FORMER STUDENT – Date Graduated: _____

FORMER NAME:

Last First Middle

PLEASE **CHANGE** MY NAME ON MY MARY BALDWIN UNIVERSITY RECORD TO:

Last First Middle

REASON FOR NAME CHANGE (CHECK ONE):

Marriage

Divorce

Legal name change

Requests for a change of name to be made to your Mary Baldwin University student record **MUST** include supportive documentation. Select ONE and attach a copy of the new identification with this request:

Official State Driver's License

New Social Security Card indicating your name change

*I assure responsibility for the consequences or problems that may occur as a result of this change of my name.
There is no intent on my part to defraud Mary Baldwin University.*

SIGNATURE: _____ DATE: _____

**Typed name on signature line above constitutes legal signature.*