

Notification of Name Change

The University of Alabama in Huntsville

Charger Central

University Center Room 118

Huntsville, AL 35899

Phone: 256-824-7777 - Fax: 256-824-7780

Name: _____ **Student ID Number** _____

Change name to: _____
Last **First** **Middle**

Signature: _____ **Date:** _____

Changes requested 3 weeks prior to grading will not be processed until the grading cycle has ended.

One of the following documents must accompany the name change form:

- Court Decree
- Driver's License
- Social Security Card

*Marriage License will not be accepted

Date Processed _____	Currently Enrolled _____
Date Verified _____	Entry Date _____