



Registrar's Office
 PMB 4748
 Moraga, CA 94575
 925-631-4214

Request for Name Change

In order to request a name change on your official academic record, you must submit this form along with copies of two different documents showing your new name to the Registrar's Office.

| | | |
|---|----------------------------|--------|
| SMC Student ID | Date of Birth (mm/dd/yyyy) | |
| Phone (with area code) | Email | |
| Address | City | |
| State | Zip | |
| <i>CURRENT NAME on record with the Registrar's Office</i> | | |
| Last | First | Middle |
| <i>NEW NAME to be filed with the Registrar's Office</i> | | |
| Last | First | Middle |

I am submitting the following 2 supporting documents:

- | | | |
|---|----------------------|----------------------|
| Driver's License | Passport | Social Security Card |
| State Identification | Marriage Certificate | Divorce Decree |
| Other Government Issued Document (Please specify) | | |
| Other Government Issued Document (Please specify) | | |

Signature

Date

PRINT