

University of San Diego
Office of the Registrar
Change of Name

**You must mail or fax your request, email will NOT be accepted*

Student I.D. # and/or Social Security#: _____

Name as currently listed in school records (Please Print):

Last First Middle

New Name (Please Print):

Last First Middle

Signature (New Name): _____
(Signature is required.)

Please Note: Name changes can only be recorded when there is legal evidence of a U.S. legal basis for change. (Marriage Certificate; Driver's License; Passport; Court Records, etc.)

EVIDENCE OF NAME CHANGE MUST BE PRESENTED WITH THIS FORM

Mailing Address:
University of San Diego
Attn: Office of the Registrar
5998 Alcalá Park
San Diego CA 92110

Fax#: 619-260-4649