

NAME CHANGE FORM

SUNY Buffalo State
Registrar's Office, Moot Hall 210
1300 Elmwood Avenue
Buffalo, NY 14222
Phone: 716-878-4811 Fax: 716-878-3419



BUFFALO STATE
The State University of New York

Complete all information in Part 1 and Part 2. Undergraduate students should return this completed form with supporting documentation in person to the Registrar's Office, Moot Hall 210. This form is for active students only.

Graduate students should return this completed form with supporting documentation in person to the Graduate Office, Cleveland Hall 204. This form is for active students only.

Banner I.D. Number

Date of Birth

PART 1 - OLD INFORMATION

Phone Number

Print Last Name First Name Middle

PART 2 - NEW INFORMATION

Print Last Name First Name Middle

PROOF PROVIDED* (CHECK ONE):

- ____ Marriage *Original Marriage Certificate or Valid Driver's License*
- ____ Divorce *Original Court Order or Valid Driver's License*
- ____ Entire Name Change *Original Court Order or Valid Driver's License*
- ____ Variation of First and/or Middle Name *Original Two Proofs of Identification or Valid Driver's License*
- ____ Changes in Spelling *Original Two Proofs of Identification or Valid Driver's License*
- ____ Foreign Name Change *Original Passport or Alien Registration Card*

*Students who cannot produce required documents in person at the Registrar's Office must have documents notarized. Notary must state on documents that they are verifying the person who produced documents for notarization is the person on the documents. Notarized documents may be mailed or faxed to the Registrar's Office along with the Name Change form.

MARITAL STATUS:

____ Single ____ Married ____ Widowed ____ Divorced

ETHNICITY:

____ Asian, Pacific Islander ____ Black Non-Hispanic ____ Hispanic ____ White Non-Hispanic
____ American Indian or Alaskan Nat. ____ Hispanic or Latino ____ Other _____

Signature

Contact phone #

Date

Email Address