# Iowa State University Student Name and/or Sex Marker Change Form

Before filling out and submitting this form, consult policies on changes to name and sex marker at [www.registrar.iastate.edu/policies/namechange](http://www.registrar.iastate.edu/policies/namechange).

This form is for students only. Changes requested here will only take place in select student information system. Please note that UHR is only able to use the name on your government-issued documents (e.g., SSN), so these changes will not appear in their system(s), which impacts student employees and graduate assistants.

**Return to:**

Office of the Registrar

214 Enrollment Services Center

Ames, Iowa 50011-2011

515-294-1840

academicrec@iastate.edu

## **Request to Change** (select all that apply) [ ]  Name [ ]  Sex marker

## **Student Information**

ISU ID number:       Date of birth:

ISU email:       Phone:

**International students with F or J status:** Certain University-maintained records must reflect the information that appears on your passport. You will not see changes in those records/systems.

## **Mark each box that applies**

[ ]  I have legal documentation that supports my requested change. I have attached copies of the following two documents which certify my requested change:

[ ]  Driver’s license

[ ]  State ID

**OR**

[ ]  Passport

[ ]  Birth certificate

[ ]  Marriage license [ ]  Other:

[ ]  Divorce decree

[ ]  Judicial decree

[ ]  Naturalization papers

[ ]  I do not have legal documentation that supports my requested change.

**Note:** This may only be utilized for a situation in which legal documentation does not exist; it is not to be used in situations in which documentation exists, but is not immediately in the requestor’s possession.

[ ]  I have applied for graduation and want my requested name on my diploma

## **By indication of current information and my signature below,** I hereby state and request that the Iowa State University Office of the Registrar use my requested name and/or sex marker for all qualifying academic records on file. I further state that my change of name and/or sex is not for fraudulent purposes or the avoidance of creditors. I understand that the university reserves the right to deny or remove any name for misuse, including but not limited to misrepresentation, attempting to avoid legal obligation, etc., with or without notice. I also understand that if my requested name is not legally changed, the University may be required to use my legal name as required by university policy, law or regulation.

**The information that is input immediately below should follow the information change you are requesting.**

First name Middle name Last/Family name

Sex marker (M or F only available at this time)

**INTERNAL OFFICE USE ONLY**

Date:

Received by:

Documentation presented:

Comments:

Student Signature

Today’s Date