

SUNY Adirondack Office of Records and Registration

ADDRESS: 640 Bay Road, Queensbury, NY 12804-1445 | **CALL:** 518.743.2279 | **FAX:** 518.832.7601 | **EMAIL:** registrar@sunyacc.edu

Legal Name Change Authorization Form

You must provide a copy of supporting documentation for this change. A Form without documentation cannot be processed. Acceptable forms of identification include; Government Issued Picture ID, Marriage License, Social Security Card, or Court Order.

Student Name (Please print): _____ **Banner ID:** _____

Please change my legal name to: _____

Permanent Address: _____
Street City State Zip Code

Phone Number: _____ **Email:** _____

The information I have provided above is accurate and true. I have provided appropriate documentation as requested above.

I understand my name, address, phone number, and personal email will be updated in my student record. The Office of Records and Registration cannot update the student user name or the name on the student Wolfmail handle and this can only be done as an additional request to the IT department.

I understand I must submit requests for updated records (i.e. transcripts, diploma, etc.) with additional forms and associated fees, if new documents are needed with my updated legal name once the change has been processed.

Student's signature **Date**

Form Submission: Completed forms and documentation can be sent or brought to the Office of Records and Registration.

REGISTRARS OFFICE USE ONLY: **Form Updated: 11/18/2021**

Identification Provided: Government Issued Picture ID Marriage License Social Security Card Court Order

The Name has been; Updated in Banner Updated on Folder Initials: _____ Date: _____