



UNIVERSITY OF SOUTH ALABAMA  
CHANGE OF NAME FORM

OFFICIAL DOCUMENTATION MUST BE SUBMITTED WITH THIS FORM. See bottom of form for required documentation. The University reserves the right to request more than one form of documentation for verification purposes. Please note that the name change will affect your academic, accounts receivable, alumni, human resources, payroll, and purchasing records with the University of South Alabama.

Jag Number: \_\_\_\_\_

Birth Date (MMDDYYYY): \_\_\_\_\_

**Name PRIOR to Change**

**Current Name**

First Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Suffix: \_\_\_\_\_

Suffix: \_\_\_\_\_

**IF YOU HAVE APPLIED FOR GRADUATION, YOU MUST ALSO CHANGE YOUR NAME ON YOUR GRADUATION APPLICATION.**

**Check the first applicable category.**

Current or Former USA Employee (including Student Workers)

Documentation needed: Social Security Card

Return form and documentation, in person, to Human Resources (Main Campus, USA Medical Center, or USA Children's and Women's Hospital). Refer to USA Website for addresses.

If marital status has changed, please contact Human Resources

USA Vendor, Consultant, Non-Employee Travel Reimbursement, or Tuition Reimbursement

Documentation needed: A copy of Social Security Card or Application Receipt Return form and documentation to Purchasing Office, USA Technology & Research Park, Bldg III, First Floor 650 Clinic Drive Mobile, AL 36688-00002 or Fax to 251-414-8291.

Current or Former USA Student

Documentation needed: A copy of Social Security Card, marriage license, court order, passport, visa, or birth certificate.

Return form and documentation to Registrar's Office, 390 Student Center Circle, Suite 1100, Meisler Hall, University of South Alabama, Mobile, AL 36688

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

<b>OFFICE USE ONLY</b>	
_____	_____
Clerk Code	Date