

Name Change

Student ID # _____

Date of Birth _____

Are you a current Rush employee? If so, please speak with the Office of the Registrar before beginning this process.

FORMER NAME
LAST Name
FIRST Name
MIDDLE Name

NEW NAME
Effective date of this information is:
Legal LAST Name
Legal FIRST Name
Legal MIDDLE Name

Please note: Students must submit with this form a copy of one of the following documents to authenticate the name change: valid driver's license, marriage certificate (the official government document issued after the ceremony), passport, social security card, court order or dissolution decree.

By signing below I certify that all the records of Rush University should be changed to my new name. I also understand that any permanent record that may have been microfilmed will not be changed, but that every attempt will be made to cross-reference the names. Additionally, by signing below, I acknowledge having been informed that my Rush University e-mail account will be changed to reflect my new name, and that the e-mail account under my former name will only exist for a finite period after the name change.

Student's Signature: _____ Date: _____

FOR OFFICE USE: Date _____ By _____

Return this form to: Office of the Registrar • Suite 440 • 600 S. Paulina Street, Chicago, IL 60612