

# LEGAL NAME CHANGE REQUEST FORM



Legal name changes must be initiated by the person in question, who must complete this form and submit it with listed documentation.

Submission of this form in person requires the original documents listed below.

If submitting this form by U.S. Mail, a notary public must copy each document listed below and notarize each copy.

Requests must be accompanied by original documentation of a legal name change (certified by the court) as specified below:

**Complete all the information below and attach documentation:**

LEGAL NAME NOW  
ON WSU RECORDS

\_\_\_\_\_ First

\_\_\_\_\_ Middle

\_\_\_\_\_ Last

**MyWSU ID #** \_\_\_\_\_

Date of Birth \_\_\_\_\_

Mo/Day/Year

CHANGE NAME TO:

\_\_\_\_\_ First

\_\_\_\_\_ Middle

\_\_\_\_\_ Last

Have you submitted an AFD (Application for Diploma)? Yes \_\_\_\_\_ No \_\_\_\_\_

If not, are you planning to order a replacement diploma? Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_ I want my Wichita State email address CHANGED to reflect my new name.

I affirm that the above information is correct, and that the change requested is for myself:

Signature \_\_\_\_\_

Date \_\_\_\_\_

Phone# \_\_\_\_\_

Email Address: \_\_\_\_\_

<I understand that making a false writing is a felony under Kansas law (K.S.A. 21-3771).>