



Current Name \_\_\_\_\_ APU ID # \_\_\_\_\_

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**Address Change(s)** Check all that apply:  Home Address  Billing Address  Diploma Mailing Address

Old Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Old Phone \_\_\_\_\_ (H) \_\_\_\_\_ (W)

New Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

New Phone \_\_\_\_\_ (H) \_\_\_\_\_ (W)

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**Email Address Change**

Old Email \_\_\_\_\_

New Email \_\_\_\_\_

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**Name Change**

**(Official documentation must accompany requests for change of name. Official documentation includes: marriage certificate, photocopy of birth certificate, social security card, driver's license, or passport.)**

New Name \_\_\_\_\_

Check if appropriate: Please make this name change on my recently filed Intent to Graduate Form and diploma order.

Student signature \_\_\_\_\_ Date \_\_\_\_\_

**Office Use Only:**

By \_\_\_\_\_ Date \_\_\_\_\_