## Boston University office of the university registrar name change form

Students who wish to change their name on Boston University Records must submit this form to the Office of the University Registrar, 881 Commonwealth Avenue, Second Floor, Boston, MA 02215 along with documentation of a legal name change. If a legal name change is sent by mail, this documentation must be notarized.

<ol> <li>Only the new or correct informa</li> <li>When entering the "CURRENT"</li> </ol>	and Birthdate must be completed for accurate identification. on that needs to be updated should be filled in. IAME" or the "NEW LEGAL NAME" please format the information according to the following: AME (COMMA) MIDDLE NAME [/] SUFFIX EXAMPLE: [J]O H N S O N , H A R R Y , J A M E S / J R
ID NUMBER	SEMESTER AND ACADEMIC YEAR LAST REGISTERED  SCHOOL OR COLLEGE  L L L L L L L L L L L L L L L L L
CURRENT NAME Last Name (Cor	ma) First Name (Comma) Middle Name (/) Suffix
NEW LEGAL NAME Last Name (C	omma) First Name (Comma) Middle Name (/) Suffix
CURRENT SEX M = Male F = Female  CORRECT SEX	CURRENT BIRTHDATE , , , , , , , , , , , , , , , , , , ,
M = Male F = Female	CORRECT BIRTHDATE MO. DAY YR.

Administrative Signature & Date

Student Signature & Date