



OWENS
COMMUNITY COLLEGE

Owens Community College – Records Office
P.O. Box 10, 000
Toledo, OH 43699-1947
Fax 567-661-2101

Change of Name

Please refer to back for detailed instructions

Date _____

OCID (Owens College Id Number) or Social Security Number _____

Former Name on Academic Record (PLEASE PRINT)

Last	First	Middle Initial
_____	_____	_____

Other Former Names _____

Are you a current student? __ Yes __ No if no, Last Year & Term Attended: _____

I hereby request that my academic records be maintained under the name (**New or Corrected**)
PLEASE PRINT

Last Name _____

First Name _____

Middle Name _____ Suffix _____

I authorize the name change on my Academic Record as specified above.

_____ Date _____

Signature

For Office use only

Date received Records Office _____ Date updated in Banner _____

Primary

- Driver's License
- State Identification card

Secondary

- Social Security Card
- Internal Revenue Service or State Income Tax Return form (W-2 is not acceptable)
- Legal or Court documents (Marriage Certificate, Marriage License, Divorce Decree, Adoption Papers, Emancipation Papers, court-ordered change of name and/or gender)

Processed in Records by: _____



Owens Community College Name Change Form Instructions

Your academic record always reflects your full legal name while in attendance at Owens Community College. A current or former student has the option of requesting the name on his/her Academic Record be modified to reflect a change in his/her legal name.

To protect the integrity of your Academic Record, we require your written authorization, primary and secondary documentation (listed below) to prove your name change. Your written authorization should include your OCID (Owens College Identification Number) or Social Security Number, all former names, the year and term you last attended OCC, your complete new name and your signature authorizing the change. You may use the Name Change Form to authorize us to change your name on your academic Record.

Documentary Proof of Your Name Change (Primary and Secondary)

******At least two sources of documentation must be submitted with this request, one from Primary area and one from Secondary area******

PRIMARY:

1. The primary document (listed below) must contain your new full name and date of birth.
 - Driver License,
Or
 - State Identification card

SECONDARY:

2. The secondary document (listed below) must contain your new full name.
 - Social Security Card,
Or
 - Signed Internal Revenue Service or State Income Tax Return form (W-2 is not acceptable)
Or
 - Legal or Court documents (i.e.: Marriage Certificate, Marriage License, Divorce Decree, Adoption Papers, Emancipation Papers, Court-ordered Change of Name and Gender)

If returning this form by mail or fax, copies of verification documents must be included with this form. Please do not submit original forms of documentation, as they will not be returned. Please complete the reverse side of this form.

Please Note: If you are submitting copies of divorce papers, ***please do not include any provision other than that ordering the name change.*** That is, include only the jurisdiction (court, county, state), the name of the parties, the name change provision, signature and date of judge or clerk of court.