

Change of Name and/or Address Form

Please submit completed form and any required documentation to: One Stop for Student Success, Campus Avenue Building Room 101, or OneStop@MiamiOH.edu

Unique ID: _____	Date: _____	
Name: _____	_____	_____
<i>Last</i>	<i>First</i>	<i>Middle</i>
Phone: _____		

Please **Print** your **Current** Name (Last, First, Middle) as it appears on your Records with Miami University.

Last *First* *Middle*

Please **Print** Your **New Legal** Name (Last, First, Middle).

Last *First* *Middle* *Maiden*

NOTE: If requesting a name change, you must include with this form documentation verifying a legal name change (i.e., marriage license, court documented name change).

New Permanent Home Address

Street Address _____

City _____ State _____ Zip Code _____ + _____

Telephone _____

Signature _____ Date _____