



## NAME and/or GENDER IDENTITY CHANGE REQUEST FORM

Refer to Chosen Name and/or Gender Identity Policy for further explanation

### Step 1: Current Information (Please Print):

- I am a current NPU student                       I am an alumnus                       I am an employee

Student/Employee ID Number: \_\_\_\_\_

Last name currently on file: \_\_\_\_\_

First name currently on file: \_\_\_\_\_

Middle name currently on file: \_\_\_\_\_

### Step 2: Documentation

Please present one of the following documents. Originals ONLY.

I wish to	Documentation required
Change my CHOSEN NAME	No documentation required
Change my LEGAL NAME	Legal Change of Name Certificate Valid US Passport Valid US Driver's License/State ID Court Order Marriage Certificate/Divorce Decree

### Step 3: Updated Name information – Choose either Step 3a or Step 3b

North Park University requires Legal Name to be used on academic, employment records and other official University documents. Chosen Name will be used whenever possible (e.g., where Legal Name is not required).

#### Step 3a: Legal Name information

Last name on documentation: \_\_\_\_\_

First name on documentation: \_\_\_\_\_

Middle name on documentation: \_\_\_\_\_

I am providing the following documentation (Please select from the list above):

\_\_\_\_\_

**Step 3b: Chosen Name information – Provide ONLY the name(s) to be changed**

Chosen Last Name: \_\_\_\_\_

Chosen First Name: \_\_\_\_\_

Chosen Middle Name: \_\_\_\_\_  No middle name

**Optional-Step 4: Gender Identity and Pronoun Change (If applicable)**

- I am requesting a gender identity change (select one):
- |                                  |  |  |
|----------------------------------|--|--|
| <input type="checkbox"/> Female  | <input type="checkbox"/> Genderqueer       | <input type="checkbox"/> Transgender (MTF) |
| <input type="checkbox"/> Male    | <input type="checkbox"/> Intersex          | <input type="checkbox"/> Other/Unspecified |
| <input type="checkbox"/> Agender | <input type="checkbox"/> Transgender (FTM) |  |
- I am requesting the following pronouns:
- |                                      |   |
|--------------------------------------|---|
| <input type="checkbox"/> He/His/Him  | <input type="checkbox"/> They/Them/Theirs |
| <input type="checkbox"/> She/Her/Her |   |

**Optional-Step 5: Title Change based on Gender Identity (If applicable)**

- I am requesting a title change:
- |                              |                               |                              |                              |                               |
|------------------------------|-------------------------------|------------------------------|------------------------------|-------------------------------|
| <input type="checkbox"/> Mr. | <input type="checkbox"/> Mrs. | <input type="checkbox"/> Ms. | <input type="checkbox"/> Mx. | <input type="checkbox"/> None |
|------------------------------|-------------------------------|------------------------------|------------------------------|-------------------------------|

**Important information**

- Upon receipt of the form, the appropriate office will review the information to ensure conformity to University policy.
- Individuals who submit this form will receive a notification from the appropriate office either confirming or denying your request.
- Updating information in the University information systems could take up to 5 business days after approval.
- The University reserves the right to deny any such request or reevaluate a previous request.
- If misrepresentation, use of offensive language, including profanity or language which has the effect of mockery, or avoiding legal obligation is involved, your request will be denied.
- Violations of University policy and standards could result in denial of request, reversal of request, and/or disciplinary action.

I acknowledge that I am requesting the above changes. If applicable, I acknowledge that I have read the Chosen Name Policy and/or Gender Identity Policy. Additionally, I acknowledge that some documents generated by the University will be required to display my legal name instead of my chosen name (i.e. transcripts, W2s, etc.).

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Office use only**

Date received: \_\_\_\_\_

Document: \_\_\_\_\_

Date approved: \_\_\_\_\_

Updated July 2018

Date processed: \_\_\_\_\_

Staff Initials: \_\_\_\_\_