Change of Name or Directory Information

Date: _____

Full name:	ID#
MHSL Email Address:	
Student Signature:	

Legal Name Change

Please note that name changes require documentation of legal name change and must display your new legal name. If your documentation does not display your new legal name, additional documentation that does display your new legal name is required.

Fill in the blank with the type of documentation provided (i.e copy of marriage license or divorce decree) and email together with this form______

Previous Name:			
First:	Middle Initial:	Last:	
Change to:			
First:	Middle Initial:	Last:	
Preferred Name Update			
Your preferred first name	appears in Canvas.		
Update my preferred nam	e to the following:		
Change in directory info	rmation:		
New Address:			
City:	State:	Zip Code:	
New Home Phone:		New Work Phone:	
New personal E-mail:			
		Please return your completed form	-
		registra	r@mitchellhamline.edu or Room 120
	Of	fice use only	
Date Received	Date Entered		ted February 2022