

Name/Demographic/Address Change Form

Important Information

- Please print clearly and complete all sections that apply to your request.
- To help us locate your record, complete all items in Section A, using your legal name as it appears currently on your record.
- If you are changing your legal name or sex, please attach the proper documentation.
- If you are updating your gender identity or other demographic information, complete the Demographic portion of Section B.
- If you are changing your address complete Section C.
- Make sure to sign and date the form.

How to Submit

In person:

Enrollment Center
Sverdrup Hall 101

By mail:

Augsburg University
Registrar's Office, CB 71
2211 Riverside Avenue
Minneapolis MN 55454

By email or fax:

registrar@augsborg.edu

Fax: 612-330-1425

Section A: Identification

Legal Name: _____
Last *First* *Middle*

Student ID (If known): _____ Date of Birth: _____ Last Four Digits of SS#: _____

Section B: Legal Name and/or Sex Change and Demographic Updates

Type of Verification Required for Legal Name/Legal Sex Change:

(Attach a copy of one of the following)

- Marriage Certificate Divorce Decree Court Order/Birth Certificate Certificate of Naturalization

New Name: _____
Last *First* *Middle*

New Legal Sex: Male Female

Other Demographic Updates (no documentation required):

Preferred First Name: _____ Gender Identity: _____

Personal Pronouns: _____ Ethnicity: _____

Check here to remove Preferred First Name currently on record

Section C: Address Change

The Address to which University information, such as billing statements and financial information, should be sent:

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email Address: _____

Section D: Required Student Signature

By signing below, I understand that my academic record will be updated to reflect the requested changes.

Student Signature: _____ Date: _____

Sign in ink, or draw your signature with a mouse or touchscreen device. Typed digital signatures are not accepted

MM / DD / YYYY

Registrar's Office Use Only

Received Date: _____ Processed By: _____ Processed Date: _____

An equal opportunity educator and employer