

OFFICE OF THE REGISTRAR  
Sherman Hall 110  
1 University Circle  
Macomb, IL 61455-1390

Phone: (309) 298-1891  
Fax: (309) 298-2787  
Email: R-Office@wiu.edu  
Visit: wiu.edu/registrar

## NAME CHANGE OR CORRECTION

---

1. Copies of TWO forms of signed legal documentation showing new name are required: **Marriage Certificate, Court Document of Name Change, or Divorce Decree (divorce decree must state that you may use this name) AND one of the following: Driver's License, State ID Card, Signed Social Security Card, Birth Certificate, \*Passport, or Military ID.**  
**\*International students MUST use their corrected passport as the second form of ID.**
2. Misspellings resulting from illegible writing are the responsibility of the student. Therefore, please print clearly and legibly on this form.
3. The student is responsible for notifying faculty and appropriate offices of the name change/correction. The student may contact the uTech Support Center to request an updated WIU email address.
4. Students who have applied for graduation must complete a revised graduation application if they wish to have their name changed on the diploma and commencement publications/releases.
5. **International students** must have this form countersigned by International Admissions before the change of name will be processed.
6. Return form and documentation to the Office of the Registrar, Sherman Hall 110, 1 University Circle, Macomb, IL 61455-1390.

**PLEASE PRINT IN BLOCK LETTERS:**

WIU ID Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name Changed from: \_\_\_\_\_  
Last/Family First/Given Middle

Name Changed to: \_\_\_\_\_  
Last/Family First/Given Middle

ALL Previous legal names used: \_\_\_\_\_

Currently Enrolled: \_\_\_\_\_ or Last Term Attended: \_\_\_\_\_  
Term & Year Term & Year

**I certify that the requested name change and/or name correction is a legitimate request and is not an attempt to defraud and/or deceive Western Illinois University.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**COPIES OF TWO FORMS OF SIGNED LEGAL DOCUMENTATION MUST ACCOMPANY THIS REQUEST**

International Admissions \_\_\_\_\_  
(if applicable) Signature Date