

Name or Social Security Number Change

Who needs to use this form?

Current and former students who wish to declare a legal name or social security number change.

Important Notes

If you are a current student, your email address will be updated, however you will need to perform the last step for completion; Gateway Services will contact Minnesota State IT on your behalf and follow-up with you on completing the last step for your email address update to take affect.

How to Submit

All students must complete sections 1 and 4. Complete section 2 for a name change, and section 3 for a social security number change.

Submit this form, along with legal documentation, to the Gateway Student Services Center by mail or in-person.

Metropolitan State University reserves the right to request more than one form of documentation for verification purposes.

Section 1 - Current Student Information

Print current name: _____
Last *First* *Middle*

Metropolitan State student ID: _____ E-mail address: _____@_____
If you are a current student of Metropolitan State, use your student e-mail address

Phone (with area code): _____ - _____ - _____ Birth Date: _____ / _____ / _____
MM DD YYYY

Are you a U.S. citizen? Yes No IF NO: type of visa: F1 Other _____
Staff: Check with International Student Services

Section 2 - Name Change

For current students, once your name change has been processed your display name will change and will impact the name you and/or others see displayed via Microsoft Office 365 (O365), D2L, email, class rosters, and official records.

Effective date: _____ / _____ / _____
MM DD YYYY

I have included a copy of legal documentation of this change.
Examples include: birth certificate, marriage license, court order, naturalization document, divorce decree (please include only pages indicating name change).

Print new name: _____
Last *First* *Middle*

Section 3 - Social Security Number Change

Effective date: _____ / _____ / _____
MM DD YYYY

I have included copies of my new social security card and a photo ID.

New social security number: _____ - _____ - _____

Section 4 - Signature

I request and authorize Metropolitan State University to change my university record using the included legal documentation.

Signature: _____ Date: _____ / _____ / _____
MM DD YYYY