



# ADDRESS AND/OR NAME CHANGE\*

Last Name

First

M.I.

University Identification Number (UIN)

## PLEASE CHANGE MY ADDRESS(ES) - COMPLETE IF APPLICABLE, SIGN BELOW

*Permanent mailing address cannot be updated to a campus housing address*

### NEW MAILING ADDRESS:

Street

Check if graduating this term

City

State

Zip code

( )

Telephone Number

#### \*Diploma Address

(If different from mailing address)

\_\_\_\_\_  
\_\_\_\_\_

### NEW EMERGENCY CONTACT:

Same as above

Name of Person to Contact in Case of Emergency - Relationship

Street

City

State

Zip Code

( )

Telephone Number

## PLEASE CHANGE MY NAME AS FOLLOWS: COMPLETE IF APPLICABLE, SIGN BELOW

### FROM:

Legal Name

Last

First

Middle Initial

### TO:

Legal Name

Last

First

Middle Initial

### Reason for Change (check appropriate box(es)):

Marriage – (attach copy of marriage documentation/driver license/social security card)

Legal Name Change - (Attach copy of court order/ driver license/social security card)

Divorce – (Attach copy of divorce decree/ driver license/social security card)  Other, Explain \_\_\_\_\_

NOTE: The documents indicated above must be attached to process request.

### Student's Signature is required to process this request(s)

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

\*Note: If you are employed by FGCU, Please make sure to contact Human Resources with Address/Name Changes

Form may be mailed or faxed with valid photo ID to:

Office of the Registrar  
10501 FGCU Blvd. S.  
Fort Myers, FL. 33965-6565  
(239) 590-7980/Toll Free (888) 373-2040/Fax (239) 590-7983  
Rev. 03/2008

For Official Use Only:

\_\_\_\_\_  
Entered into Banner - Initial and Date