

University of Oregon Student Name/Gender Change Form

Note that the Name/Gender Change Form cannot be used by current or previous University employees. Employees requesting a name change should contact payroll.

Return to:
Office of the Registrar

Email:
registrar@uoregon.edu

Please fill out the form completely and attach necessary documentation:

Students who have a copy of a valid ID (see list below) MUST submit this form to the Registrar to change their name and/or gender marker, as recorded in UO records.

Return to:
LGBT Education and Support Services
Office of the Dean of Students
380 Oregon Hall
5216 University of Oregon
Eugene, OR 97403-5216
Phone: 541-346-6105
Email: LGBTSS@uoregon.edu

Requested Changes:

Select all that Apply

Name Change Gender Marker Change

UO ID Number: _____ Date of Birth: _____

Address: _____
Street City State Zip

E-mail: _____ Phone: () _____

Previous Name(s): _____
(If applicable)

Previous Gender Marker: _____
(If applicable) (Male/Female)

Mark each box that applies (mandatory):

- I am an international student.
 - o International students: The name on your University of Oregon records must match your passport. A copy of this document must be attached for processing.
- I have applied for a University of Oregon degree and wish to use my new name on my diploma.
- I have attached a valid copy of one of the following:

If documentation is not available please submit form to LGBT Education and Support Services

 - o Driver's License
 - o State ID
 - o Passport
 - o Birth certificate
 - o Marriage License specifically stating the new name after marriage
 - o Divorce Decree authorizing the name change
 - o Judicial Decree specifically authorizing a name change
 - o Naturalization papers stating the change of name
- I do not have a valid copy of one of the documents in the list above

By my signature below, I hereby request that the University of Oregon use my new name and/or gender marker for all my records on file. I further state that my change of name or gender is not for fraudulent purposes or the avoidance of creditors.

Please print your new name, preferred name, and/or gender clearly and in the manner requested.

First Name Middle Name Last/Family Name

New Gender Marker (if applicable) Preferred Name (if applicable) Handwritten Signature of New Name

OFFICE USE ONLY

Comments:

GUASYST LPAIDEN SPAIDEN SHADEGR SGASTDN

ID Presented: _____ Received by: _____ Date: _____