



The student must complete this form to change the legal name maintained on the student's official SUSLA record and submit it with supporting documentation to the Registrar's Office. This form should be only to change your name on the University's official records, not to correct or adjust the spelling or format of your name.

If you have submitted an Application for Graduation, contact the Degree Auditor in the Registrar's Office to ensure that your updated name appears on the diploma and Commencement program.

Change of Name, Social Security Number or Date of Birth.

Please check the type of Name S	-	-	equired)] Date of	Birth (birth certificate required)
Current Name:			S	USLA ID	#
Current Name:	First DOB	Middle			
Address:		City		ST	7.
	SUSLA Skymail (2			Zip @susla.skymail.edu
	Personal Email:				
New Legal Name:					
Last		First			Middle
Supporting Documentation: (a minimum of 2 is required)	Driver's License Government ID Birth Certificate	Divor	Security C ce Decree Issued Doe	[Military ID Passport Marriage License
NOTE : Students who receive any form of federal or state student aid are required to change their name with the Social Security Administration before changing their name with SUSLA.					
Change of Address:					
Please check the type of contact information that you want to change: Home Address Mailing Address F-1 VISA Student Address Home Phone Number Mobile Phone Number					
Current Address:	-				
Street Add		City		ST	Zip
New Address:	ess	City		ST	Zip
Current Phone Number:		New P	Phone Nur	nber:	
Effective Date: Year	Semester E	all 🗌	Spring		Summer
Student's Signature:			Date: _		
					Registrar's Office Use Only
3050 Martin Luther King, Jr. Drive Shreveport, Louisiana 71107	FA	ne: (318) 670-92 X: (318) 670-63	344	F	Date Processed:
www.susla.edu	registraroffice@susla.edu				Processed by: