



**Address and/or Name Change**

NOTE: You may print this form, complete it and fax or bring it to the Registrar's office; however, all requests MUST be accompanied by a copy of your driver's license or other official identification that includes a signature.

All requests for a name change require legal documentation. Documentation generally consists of new driver's license, official state ID card, certified copy of marriage license, court order, dissolution decree, or current passport.

S ID number or SSN \_\_\_\_\_ Date: \_\_\_\_\_

Status: Check Each That Apply: Student \_\_\_\_\_ Employee\* \_\_\_\_\_

\*Employees (including work study or student employees) must contact Human Resources to update this information.

Name: (Print) \_\_\_\_\_  
(Last) (First) (Middle)

**GRADUATION DATE:** \_\_\_\_\_

**Do you want your name changed on your pending diploma? Y N**

Former Name(s): \_\_\_\_\_

**Your University e-mail address will be updated and your previous account terminated. Please remember to update your name in Blackboard, if applicable.**

Change mailing address to:

\_\_\_\_\_  
(Street Address or P.O. Box)

\_\_\_\_\_  
(City) (State) (Zip Code)

Phone: \_\_\_\_\_ Secondary E-Mail: \_\_\_\_\_

Emergency Contact (Update if needed): \_\_\_\_\_  
(Name) (Relationship)

\_\_\_\_\_  
(Street Address or P.O. Box)

\_\_\_\_\_  
(City) (State) (Zip Code)

Emergency Contact Phone: \_\_\_\_\_

Student Signature \_\_\_\_\_

Mail this form with identification to:  
Missouri Southern State University  
Registrar's Office  
3950 E. Newman Road  
Joplin, MO 64801

Or fax with identification to:  
Registrar's Office  
(417) 625-3117

THIS FORM WILL BE MADE AVAILABLE IN ALTERNATIVE FORMATS UPON REQUEST. IF YOU NEED ASSISTANCE, PLEASE CONTACT THE REGISTRAR'S OFFICE.