Name Change Form
2008-2009

UNIVERSITY OF Massachusetts Amherst
Financial Aid Services

Spire ID#:_____

The University of Massachusetts Amherst requires that you submit to the Financial Aid Office the original certificate or notarized copy of the document that legally validates your change of name (e.g., marriage license, divorce decree). This insures the protection of your record. It is understood that this change is made without any intent to defraud the University or those persons/institutions who might request a copy of your record.

A. STUDENT INFORMATION
(Please print legibly)

Your New Name:_____
(as it should appear after the change)

Your Previous Name:_____

Social Security Number_____ - _____ - _____

B. REASON FOR NAME CHANGE (❒ check all that apply):

[ ] Marriage [ ] Legal Separation [ ] Divorce

[ ] Legal Change of Name [ ] Misspelling [ ] Other _____

C. SIGNATURE

_____
Student Signature Date

Please be aware that if you receive financial aid you must update all of your financial aid records including your FAFSA form and your Social Security Administration record to be consistent with the above information.

D. FOR OFFICE USE ONLY

Name as it appeared prior to change: _____

Original certificate/notarized copy received: _____

Initials: _____

Date: _____

Financial Aid Services | 255 Whitmore Administration Building |181 Presidents Drive |
Amherst | MA | 01003-9313 | Telephone 413.545.0801 | TDD 413.545.9420 | Fax 413.545.1700

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