



# NAME CHANGE FORM

**REQUIRED DOCUMENTATION** - Social Security Card **OR** Court Order with the New Name and supply valid photo identification.

Date \_\_\_\_\_

Student ID Number \_\_\_\_\_  
*(Please refer to the front of your student ID card)*

Phone Number \_\_\_\_\_

**PLEASE PRINT YOUR "LEGAL" NAME AS REGISTERED WITH RCC (DO NOT USE NICKNAMES):**

\_\_\_\_\_  
Last

\_\_\_\_\_  
First

\_\_\_\_\_  
Middle

**PLEASE PRINT YOUR NEW "LEGAL" NAME**

\_\_\_\_\_  
Last

\_\_\_\_\_  
First

\_\_\_\_\_  
Middle

Reason for Name Change: \_\_\_\_\_

Have you applied for or been awarded financial assistance during the academic year in which the change is to become effective?

Yes                      No

Will you use Veterans Benefits?

Yes                      No

**ATTENTION:**

**Once the name change process is complete,  
you will be required to login to WebAdvisor,  
Student Email and Moodle using your  
new name.**

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

Unless sent from an official Rockingham Community College email account this form must have a handwritten signature.

**Office Use Only:**

Received by \_\_\_\_\_

Date \_\_\_\_\_

**\*\*Attach documentation\*\***

Processed by \_\_\_\_\_

Date \_\_\_\_\_

Colleague/Doc E Scan/Track-It/File (if applicable)