



Student Name Change Form

Phone 208.524.3000 ext. 4 – Fax 208.525.7026

1600 S 25th E – Idaho Falls, ID 83404 – www.cei.edu

Student Information

Date _____ Student ID _____
Name _____ Program _____
Address _____ Phone Number _____
Former Name _____

Legal Name Change

Legal names will appear on official/unofficial transcripts, federal reporting, placement testing, enrollment verification documents, financial aid & billing documents, CEI email/username, and student ID badges.

Please submit **one** of the following items showing your **new** name:

- Certified Court Order Granting Name Change
- Government Issued Photo ID (i.e. Driver's License, Passport, Military ID)
- Social Security Card

Error/Typo (Check all that apply):

- First Name
- Middle Name
- Last Name
- Birth Date
- Social Security Number

Chosen Name Change

A chosen name differs from your name that appears on legal records. A chosen name will appear on class and grade rosters, Canvas, Self-Service, and campus communications.

- Add Chosen Name _____
- Remove Chosen Name

I request that my named be changed in official school records in accordance with College of Eastern Idaho's policies and procedures. I understand that this request **does not** change my CEI email/username **unless** an error/typo is present within my name:

Student Signature _____ Date _____

For CEI Use

Comments: _____

Signatures

Registrar's Office _____ Date _____