NORTH GEORGIA COLLEGE & STATE UNIVERSITY

Request for Name Change

This form must be notarized and returned to the Registrar's Office along with a ***certified*** copy of **legal documentation** resulting in this name change, for example a **marriage certificate, court order**, etc.

ngcsuID#: _____

Change from: _____
Last First Middle/Maiden

Change to: _____
Last First Middle/Maiden

Spouse's Name: _____ Effective Date of Change: _____

Student Signature: _____

_____
NOTARY
MY COMMISION EXPIRES: _____

NOTE: If an address change is needed, please submit a completed 'Change of Address' form to the Registrar's Office.

Office of the Registrar
Price Memorial Hall, Room 221
Dahlonega, GA 30597
706-864-1760