



Name Change Request

Submit form in-person to the Athens Campus Admissions Office or
email: admissions@athenstech.edu

Student ID Number or SSN: _____

Previous Last Name: _____

Previous First Name: _____

Previous Middle Name: _____

*CURRENT Last Name: _____

*CURRENT First Name: _____

Current Middle Name: _____

*Requires copy of one of the following documents to be submitted with the form:

- Driver's License
- Social Security Card
- Marriage License
- Birth Certificate
- Court Order
- Passport

Signature

Date

Office Use Only

Received By: _____ Date: _____ Processed By: _____ Date: _____