

PREFERRED NAME REQUEST FORM

Please fill out the information below and sign at the bottom. Return the form and a photo ID to the Registrar's Office:

- Upload securely at: https://securefile.memphis.edu/form/rsu
- In person: Registrar / 003 Wilder Tower

Enter your curre	nt legal name (as it appears	s on your University record)	:	
First: Middl Last:	e:			
U-Number:		DOB (mm/dd/yy):		
Phone #: University Email:				
I would like	o add or change my prefer	red name to:		
First	Middle	Last		
I may have only one display my legal na		at any time. My official academic	record, including my transcript, will	
	ility for the consequences or pro raud the University of Memphis.	oblems that may occur as a resul	t of this request for preferred name. It i	
I would like	to remove my preferred nar	ne.		
Signature:		Date:	Date:	
For Registrar Office Use Only	Date Banner Updated:		Ву:	