

Worcester Polytechnic Institute

Office of the Registrar

Name/Gender Change Form

Instructions:

Note: This form is for former WPI students only. Current WPI students please complete the legal name section under personal information in Workday.

Please complete this form in its entirety and submit it along with the required documentation listed below.

Part I Name/Gender Change:

Student ID: _____

Former Name: (please print)

First Name	Middle Name	Last Name
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New Name: (please print)

First Name	Middle Name	Last Name
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Former Gender: Male Female

New Gender: Male Female

Part II Reason for Name/Gender Change: (check all that apply)

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> Marriage | <input type="checkbox"/> Legal Separation |
| <input type="checkbox"/> Divorce | <input type="checkbox"/> Legal Change of Name |
| <input type="checkbox"/> Misspelling | <input type="checkbox"/> Gender Change |

Part III Documents Required: (Choose One)

- Legal copy of a government-issued photo ID with new name/gender (Driver's License or Passport)
- A notarized Name Change Affidavit
- A certified copy of the Marriage License
- Copy of Social Security Card with new name or gender
- A certified copy of the Divorce Decree that reinstates the maiden name
- A certified copy of the Court Order that changes gender

Part IV Signature:

Student Signature: _____ Date: _____

E-mail Address: _____

By submitting this form with the required documentation and signing below, you are requesting that the WPI Office of the Registrar change your name and/or gender in the student database, Workday. We will process your request within 3 to 5 business days and email you when it is complete. By signing below, you authorize the release of your name/gender change documents to the National Student Clearinghouse for the purpose of notifying lenders and allowing employers and other authorized parties to verify your enrollment and/or degree.

Part V Office Use:

Name and/or gender as it appeared prior to change: _____

Documentation received: _____

Initials and Date: _____

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