Preferred Name Change Request Form

Under certain circumstances where student safety or productivity may be at risk through disclosure of the student’s legal first name, this form provides a process by which a preferred first name may be created. This preferred name will not affect the legal name being displayed through MyKU and other official records. The preferred name is applicable only for auxiliary systems such as KUnited, D2L, etc.

Current Legal Name: ____________________________________________________________

First                                                M.I.                                                      Last

Student ID Number: ______________ KU Email: __________________ Cell Phone: _______________

Address: ______________________________________________________________________

Street    City   State   Zip

Requested Preferred Name: ________________________________________________________

(ONLY A STUDENT’S FIRST NAME MAY BE REQUESTED)

Student Status: _____ UG _____ GR _____ UG Non-Degree _____ GR Professional Credit

Reason for Requested Name Change:

___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

Student Signature: ___________________________________________  Date:  ___________________

Requests are to be submitted to the Office of the Registrar.
115 Stratton Administration Center

Office Use Only

Approved: ________________________________________________________________
Rejected: ________________________________________________________________
Action Date: ________________________________________________________________