Change of Name/Address Form

The Name/Address Change Request form is a University of Alabama at Birmingham (UAB) One Stop Office document, but we ask that you submit the form to the School of Nursing Registrar. The School of Nursing Registrar will update your School of Nursing records before requesting to have the UAB One Stop Office update all of your other UAB records.

When completing the form, please use upper/lower cases and proper address formatting (for more information, please visit www.usps.com).

Forms, and required documentation, should be submitted to the School of Nursing Registrar via email (sonregistrar@uab.edu) or fax to 205-934-5490.

If you would like to mail the form, please use the following address:

UAB School of Nursing
Attention: School of Nursing Registrar
NB 1002; 1720 2nd Avenue South
Birmingham, AL 35294-1210
Name Change Request

Please change my name as follows:

From: ________________________________
       First Name                        Middle Name                        Last Name

To: ________________________________
     First Name                        Middle Name                        Last Name

For the following reason:

Married on __________________________ Divorced on __________________________
       Date                             Date

Court Action/Other: (State specific reason) ________________________________

OFFICIAL DOCUMENTATION AND VALID IDENTIFICATION
MUST BE PRESENTED WITH REQUEST

Acceptable forms of ID include state-issued picture ID with the new name and one of the following:

- Marriage Certificate
- Divorce Decree
- Court Order
- Social Security Card
- Birth Certificate
- Passport (for international students)

**Documentation must reflect the new name**

I certify that the above statements are correct and complete and that there is no intent on my part to defraud.
I further state that the name currently on record and the name requested are for one and the same person.

Blazer ID ________________________________

Student Signature ________________________________

NOTE: If you have already completed an Application for Graduation you must mark this box so that we know to check the name that will appear on your diploma. (The name on the diploma must be your new name or a variation of your new and/or past name(s) that we have on file for you; it cannot be a name that we do not have in our records.)

Deliver to:

One Stop Student Services
Hill 103
1720 Ave S
Birmingham, AL 35294-1113
Change of Address

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Attention: SON Registrar
NB 1002; 1720 2nd Avenue South
Birmingham, Al. 35294-1210

Student Number / Blazer ID __________________________ Today’s Date __________________________

Current Last Name (if changing) __________________ Current First Name (if changing) __________________

New Last Name (if changing) __________________________ New First Name (if changing) __________________

New Address __________________________________________ Phone Number __________________________

City __________________________ State __________ Zip Code __________________________

_________________________________________ __________________________
Signature Date