



Butler University

Address/Phone/Gender/Name Change Form

SUBMISSION INSTRUCTIONS:

Students: Submit your form to Registration and Records. **Faculty and Staff:** Submit your form to Human Resources.

University ID Number: _____ Name: _____

Affiliation with the University (Mark all that apply): Student Faculty Staff

Name Change

Change affects Primary/Legal Name

Must attach copy of new social security card

Prior Primary Name (last, first, middle): _____

New Primary Name (last, first, middle): _____

Degree Name

Degree name is the one listed on your Diploma and in the Commencement program.

Prior Degree Name (last, first, middle): _____

New Degree Name (last, first, middle): _____

Gender Change

Effective Date: _____

Prior Gender Male Female Other

New Gender Male Female Other

Address and Telephone Change Home (your permanent address)

Address Line 1: _____

Address Line 2: _____

City: _____ State: _____ Zip Code: _____

Phone: () _____

Current (this address is intended to be used as your on campus, Study Abroad, or local if different from your Home Address)

Address Line 1: _____

Address Line 2: _____

City: _____ State: _____ Zip Code: _____

Phone: () _____

Signature: _____ Date: _____

Internal Use Only

Updated in System by:

Date:

Rev. 04/26/2022