Chosen/Preferred Name Declaration Form



Registrar • School of Visual Arts 209 East 23rd Street, New York, NY 10010-3994 p212.592.2200 • f 212.592.2069 registrar@sva.edu

SVA recognizes that many members of our community use names other than their legal names to identify themselves. Therefore, any student, staff, or faculty member may declare a chosen or preferred name to be used wherever possible across campus.

Use of the chosen or preferred name will be reflected on the following SVA records:

- Grade rosters
- Attendance rosters
- SVA ID cards

Please be advised that a legal name is required for all other records, including student transcripts, financial aid documents and student invoices, payroll records, and tax documentation. Additionally, all official correspondence from the College will use your legal name.

Please check all that apply:	STUDENT	STAFF	FACULTY	
LEGAL NAME				
Your name as it currently appears in SVA's record				
Last Name				
First Name				
Middle name / Initial				
CHOSEN OR PREFERRED N	IAME			
Your name as you wish it to ap	ppear on the SVA rec	cords listed above		
Last Name				

First Name

Middle name / Initial

This is to attest that I am the student, faculty and/or staff signing this form and I authorize SVA to update my chosen or preferred name in all applicable College records.