Legal Name Change 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

If you are a current or former student at SVA, use this form to make a permanent change to your legal name on all College records, including transcripts, student bills, financial aid documents, and tax forms.

If you are a current staff or faculty member, contact Human Resources for the appropriate name change documentation in lieu of completing this form.

Legal name change requests must be accompanied by appropriate legal documentation (e.g., a court order, marriage license, federal/state ID, etc.).

CURRENT NAME		
Your name as it currently appears in SVA's record		
Last Name		
First Name		
Middle name / Initial		
		☐ Male ☐ Female
Chosen or Preferred Name (if applicable)		Sex (if applicable)
NAME CHANGE INFORMATION		
Your updated name as reflected in the supported of	documentation	
Last Name		
First Name		
Middle name / Initial		
		☐ Male ☐ Female
Chosen or Preferred Name (if applicable)		Sex (if applicable)
This is to attest that I am the student signing this College records.	form and I authorize SVA to update my le	gal name in all applicable
Student Signature	SVA ID#	Date (MM/DD/YR)