

**REQUEST FOR NAME CHANGE**

Your name as shown in uoZone will appear on all official documents.

A request for name change must be supported by original documents or by certified or notarized copies. All documents written in a foreign language must be translated into French or English by a certified translator.

Please print, complete and submit this form in person to InfoService in Tabaret Hall (75 Laurier Avenue East, Room 129, Ottawa ON K1N 6N5).

PLEASE PRINT

STUDENT INFORMATION			
SURNAME AND GIVEN NAMES PRIOR TO CHANGE	STUDENT NO.		
NEW SURNAME AND GIVEN NAMES	DATE OF BIRTH		
ADDRESS		CITY	YEAR   MONTH   DAY
NO. AND STREET	CITY		
PROVINCE	POSTAL CODE	AREA CODE AND TEL. NO.	

REASON FOR CHANGE
All requests must be accompanied by two valid pieces of identification, one of which is photo identification. See list below.
<input type="checkbox"/> NAME CHANGE BY MARRIAGE <input type="checkbox"/> NAME CHANGE BY LAW <input type="checkbox"/> RETURN TO MAIDEN NAME <input type="checkbox"/> GIVEN NAME CHANGE

ACCEPTABLE IDENTIFICATION
<input type="checkbox"/> CANADIAN OR FOREIGN PASSPORT <input type="checkbox"/> BIRTH CERTIFICATE <input type="checkbox"/> MUNICIPAL EMPLOYEE ID
<input type="checkbox"/> DRIVER'S LICENCE <input type="checkbox"/> CANADIAN OR FOREIGN MARRIAGE CERTIFICATE, DIVORCE ORDER OR JUDGMENT <input type="checkbox"/> SOCIAL INSURANCE NUMBER CARD
<input type="checkbox"/> PROVINCIAL HEALTH CARD <input type="checkbox"/> PERMANENT RESIDENT CARD <input type="checkbox"/> AFFIDAVIT
<input type="checkbox"/> CERTIFICATE OF INDIAN STATUS <input type="checkbox"/> FEDERAL EMPLOYEE ID <input type="checkbox"/> CERTIFICATE OR COURT ORDER ISSUED UNDER A PROVINCIAL CHANGE OF NAME ACT OR SIMILAR LEGISLATION
<input type="checkbox"/> CANADIAN CITIZENSHIP CERTIFICATE <input type="checkbox"/> PROVINCIAL EMPLOYEE ID

CONVOCATION
To ensure that your name is changed before your diploma is printed, you must submit your request to InfoService before March 31 for Spring Convocation or September 15 for Fall Convocation.
WILL YOU BE RECEIVING YOUR DIPLOMA AT THE NEXT CONVOCATION CEREMONY? <input type="checkbox"/> YES <input type="checkbox"/> NO

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I HAVE READ AND UNDERSTOOD THE INFORMATION EXPLAINING THAT MY PERSONAL INFORMATION WILL BE PROTECTED AT ALL TIMES IN ACCORDANCE WITH THE FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT.

\_\_\_\_\_ DATE

\_\_\_\_\_ SIGNATURE (STUDENT)

## **Notice of Collection of Personal Information**

In accordance with the *Freedom of Information and Protection of Privacy Act* of Ontario and with University Policy 90, your personal information is collected under the authority of the *University of Ottawa Act*, 1965. Your personal information provided on this form will be used by the University for purposes of and those consistent with the administration of University programs and activities and in order to carry out other University services and functions, including recruitment, admission, registration, academic programs, evaluations, financial aid and awards, assisting student associations and graduation. If you have questions about the collection, use and disclosure of your personal information in this notice, please contact InfoService at 613-562-5630 or [infoservice@uOttawa.ca](mailto:infoservice@uOttawa.ca).