



## Gender Designation Change Form

### Instructions

Complete this form and submit to the Office of the Registrar.

**Students submitting this form are required to include one of the following types of documentation:**

- Copy of birth certificate or court order legalizing the gender identity
- Driver's License, Passport, or government issued ID reflecting the new gender identity

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**UCA ID Number:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Full Legal Name:** \_\_\_\_\_

**Former Name (if applicable):** \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Telephone number:** \_\_\_\_\_ **UCA e-mail:** \_\_\_\_\_

**Request gender changed to:**       **Male**  
    **Female**

To change your name on your permanent student record,  
please complete a Name Change Form.

You can submit this form by:

Person: Harrin Hall Suite 224

E-mail: [regofc@uca.edu](mailto:regofc@uca.edu)

Fax: 501-450-5734

Mail: Office of the Registrar

Harrin Hall suite 224

201 Donaghey Ave

Conway, AR 72035

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# NAME/ADDRESS CHANGE REQUEST FORM

## University of Central Arkansas

PRINT OR TYPE ALL INFORMATION- Incomplete forms cannot be processed

ID# B \_\_\_\_\_ NAME: \_\_\_\_\_ Student  Staff/Faculty   
SSN# \_\_\_\_\_ (For UCA Employees only) EMAIL \_\_\_\_\_

### Change Name To:

\_\_\_\_\_  
Last Name Suffix First Name Middle Name

Change Address: Mailing  Parent Address  (Indicate address type)

\_\_\_\_\_  
Address (Street Name and Number) Apt#

\_\_\_\_\_  
City State Zip/Country

\_\_\_\_\_  
Area Telephone Number

I request UCA include my most recent former last name on any transcript that is released.

Yes \_\_\_ No \_\_\_

\_\_\_\_\_  
\*Signature

\_\_\_\_\_  
\*Date

\*REQUIRED. THIS FORM CAN NOT BE PROCESSED IF NOT SIGNED AND DATED.

For CURRENT UCA EMPLOYEES ONLY, check one of the following:

\_\_\_ Full-Time \_\_\_ Part-Time \_\_\_ Temp \_\_\_ Graduate Assistant \_\_\_ Student Assistant

### FOR OFFICE USE ONLY:

#### Type of I.D.:

- Driver's license  
 Marriage license  
 Birth Certificate  
 SSN Card  
 Court order  
 Other (specify) \_\_\_\_\_ Date: \_\_\_\_\_

By: \_\_\_\_\_

#### Recorded:

- Computer record  
 Paper record

### EXAMPLES OF APPROVAL FORMS OF IDENTIFICATION:

#### Registrar's Office:

- Driver's License
- Marriage License
- Birth Certificate
- Court Order

#### Human Resources Office:

- Social Security Card (required for name change only)

Note: To change your name/address on personnel records, please complete this form and return it to the Human Resources Office with an acceptable form of identification showing the applicable changes.

To change your name/address on the permanent student record, please complete this form and return it to the Office of the Registrar with an acceptable form of identification showing the applicable changes.