



<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>First Name</i>	<i>Last Name</i>	<i>PAWS ID</i>
Former students only:*	<input type="text"/>	<input type="text"/>
	<i>Years of attendance</i>	<i>Social Security Number</i>

Changes to Personal Information

Use this form to request to update your legal name and/or gender in official TCNJ records. All requests must be accompanied by a government-issued photo identification document showing the updated name and/or gender. For a change in legal name, a secondary document is required as detailed below.

Please note that any discrepancy between a student's legal name of record at TCNJ and the name appearing on their Social Security card can interfere with financial aid eligibility and verification.

*A former student's legal name can only be updated in the case of a court-ordered name change.

A. CHANGE OF LEGAL NAME

Requests must be presented alongside one form of government-issued photo identification AND a secondary document linking the current and previous name, which may include: marriage license, divorce decree, or court order.

1. Select reason for name change

- ☐ Correction of Error
- ☐ Court-Ordered Name Change
- ☐ Marriage or Divorce
- ☐ Other (please specify): _____

Additional documentation may be requested upon receipt

2. Specify Updated Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>

3. Specify Previous Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>



B. CHANGE OF GENDER

Requests for a change of legal gender must be accompanied by government-issued photo identification which reflects the updated gender information.

1) Specify Updated Gender

☐ M (Male)

☐ F (Female)

☐ X (Unspecified)

C. SIGNATURE AND FORM SUBMISSION

Sign below and submit to the Office of Records and Registration.

- 1) Submit in person: Records and Registration, Green Hall 112
- 2) Submit by mail: Records and Registration, PO Box 7718, Ewing NJ 08628-0718
- 3) Submit electronically: email recreg@tcnj.edu to receive instructions on secure document submission.

Signature

Date

For Office Use Only

Documents:

Staff Initials:

Date: