

Office of Student Affairs &Registrar
Notification of Legal Name Change



**Tai Sophia
Institute**

7750 Montpelier Rd.
Laurel, MD 20723
phone
410-888-9048
301-725-1674
fax
410-888-9278

Please print this form, fill it out completely, and mail or fax it to the Office of the Student Affairs and Registrar at 410-888-9278, with supporting documents. If you have any questions please call the Registrar's office at 410-888-9048 ext. 6659

Former Legal Name (please print) _____

Current Legal Name (please print) _____

Date of Legal Name Change _____ Social Security Number _____ - _____ - _____

Home Street _____ City, State, Zip _____

Phone: (____) _____ email: _____

Please check one or more of your affiliation(s) with Tai Sophia Institute:

Current Student Program/Track _____

Alumnus/Alumna Program/Track _____

Other – Please describe _____

Additional changes or comments:

Please sign and date (we will be keeping this information in your personal file in the Registrar's Office).

Signature _____ Date _____

Any student or Alumni of Tai Sophia Institute may request a name change by submitting a letter to the Registrar's Office. All name change requests must be accompanied by official documentation, which may include a copy of a marriage certificate, social security card with photo ID, driver's license, passport, or divorce decree. Requests for name change will not be processed without sufficient documentation.