Columbia Basin College

Name Change Request

SECTION A: Student Information

Please only use the spaces provided.

PREVIOUS NAME			NEW NAME		
Last name (Legal)	First name (Legal)	M.I.	Last name (Legal)	First name (Legal)	M.I.

*This example uses all 22 digits available - **Lopez-Garcia Lupe G JR***

___ — __ — ____

STUDENT IDENTIFICATION NUMBER

SECTION B: Supporting Documentation

Please attach a copy of the following documents:

❑ Driver's License with new name

AND one of the following:

❑ Driver's License with previous name

❑ Marriage License

❑ Court Document

Student Signature: _____ Date: _____

SECTION C: Where to Submit

In Person
Hawk Central
H Building
Pasco Campus

Mail
Columbia Basin College
Student Records, MS-H4
2600 N 20th Ave
Pasco, WA 99301

We are temporarily unable to accept this form 'In Person' while our campuses operate remotely. Please submit the completed form and documentation via mail (as listed above) or from your CBC email to records@columbiabasin.edu.

Office Use Only:	
Task:	Initials/Date:
Data Input _____ SM2001	_____/_____
Make New Label _____	_____/_____

Rev 12'19

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