

Change Request for Name on Record

Required Documentation

Incomplete/undocumented requests will be returned unprocessed.

• Valid unexpired driver's license or social security card if on previous student record, marriage certificate, U.S. Government ID card or applicable court document.

Name on record:

Please print the name that currently appears on your Mercy College of Health Sciences record.

(Last Name)	(First Name)	(Middle Name)
New/corrected name:		
Please print the name that yo documented as per the above	u would like to appear on your recor e.	ds. This name must be
(Last Name)	(First Name)	(Middle Name)
Reason for name change: (Ch	eck only one)	
🗋 Marriage		
Divorce		
Other legal name change		
Personal email address		

Information Technology will email your personal email address once the change has been processed. Your student email and MyMercy user IDs will reflect your name change. Please contact all your instructors notifying them of this change.