

**Louisiana Delta Community College**  
Division of Student Affairs · Office of Enrollment Services  
**Change of Name Form**

To change your name for any reason (e.g., divorce, marriage, adoption, legal name change), you must;

- **Complete** and **Sign** this form;
- **Present** your original social security card; and
- Provide a photo ID.

Presenting a *copy* of your card is not acceptable, and no other document or form of identification will be accepted in lieu of the Social Security Card. Only the name as it appears

Student ID number          Social Security Number

Change Name From     
Last First Middle/Maiden

Change Name To     
Last First Middle/Maiden

Will you graduate from Delta during the current term:  Yes  No Telephone Number

By my signature below, I verify that the statements above are correct.

Student's Signature (required)

Date

For Office Use Only:  
Processed By: \_\_\_\_\_  
Date: \_\_\_\_\_

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Presenting a *copy* of your card is not acceptable, and no other document or form of identification will be accepted in lieu of the Social Security Card. Only the name as it appears on the Social Security Card will become part of the student's Delta record. The name on the Delta record will reflect the name exactly as it appears on the Social Security Card.

Student ID number          Social Security Number

Change Name From     
Last First Middle/Maiden

Change Name To     
Last First Middle/Maiden

Will you graduate from Delta during the current term:  Yes  No Telephone Number

Student's Signature (required)

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