



Jacksonville University
2800 University Blvd. N.
Jacksonville, FL 32211

NAME CHANGE FORM

Jacksonville University
Registrar's Office

Name Change From (Please Print)

Name Change To (Please Print)

JU ID #

Signature

Date

Reason For Change:

Correction

Please attached copy of document

Citizenship

Marriage Certificate

Court Papers

Marriage Dissolution

Other _____

Registrar's Use Only:

Updated by: _____

Date: _____