



REQUEST FOR LEGAL NAME CHANGE

Instructions for current students or former students enrolled after 2002

Please complete this form and provide one of the following pieces of identification in person, by fax (304-473-8531) or scanned and emailed to registrar@wwvc.edu. Documents not submitted in person must be accompanied by a copy of a government-issued identification.

Valid Driver's License Social Security Card Divorce Decree
 Passport Birth Certificate (corrections to name only)
 Court Order Marriage Certificate/License

Please complete ALL of the following:

Current Student Former Student (dates enrolled: _____)

Date of Birth: _____ ID # (if known) _____

NEW NAME	
First:	_____
Middle:	_____
Last:	_____
FORMER NAME	
First:	_____
Middle:	_____
Last:	_____

Signature: _____ Date: _____

For Office Use Only

Received by: _____ Date: _____