



GOLDEN WEST COLLEGE  
NAME CHANGE REQUEST

OFFICE USE ONLY:
INITIALS: _____
RCVD: _____
<input type="checkbox"/> STATE ID
<input type="checkbox"/> OFFICIAL DOC

Please provide the following *two* documents:

1. State Issued ID Card with New Name (*ex. driver's license*)
2. Official Documentation (*ex. Court Ordered Name Change, Marriage License, Cert of Naturalization*)

Current Name \_\_\_\_\_ GWC ID # \_\_\_\_\_  
Last First M.I.

New Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Last First M.I.

Contact Email Address \_\_\_\_\_ Phone # \_\_\_\_\_

Are you now, or have you ever been an employee of the Coast Community College District (OCC, GWC, CCC, KOCE or the District Office)?  Yes  No If yes, please go to Human Resources to request name change.

If you an International Student (F1 visa), please change your name through the International Center.

NAME CHANGE INFO

**Transcripts:** New name will appear on GWC transcript (OCC or CCC transcript if applicable).

**Course Roster(s):** New name will appear on instructor(s) on-line class roster(s).

**Financial Aid recipients:** Notify the Financial Aid Office of name change.

- I understand my current username and email **do not change** on my MyGWC/Coast District account. I have read and understand the information regarding the name change process.

Please allow 3-5 business days for processing and notification of change.

X \_\_\_\_\_  
Signature / Date