



AFFIDAVIT OF CHANGE OF NAME

This form must be accompanied by proof of change of name, i.e. copy of Marriage Certificate, and signed by a Notary Public.

Reason For Change: (select one)
○ Given Name
○ Court Order
○ Marriage
○ Naturalization
○ Divorce
○ Other (specify) _____

Old Name: _____
Last First Middle

New Name: _____
Last First Middle

Address: _____ Email: _____
Street

City State Zip Tel: _____

Effective date of change: _____
(mm/dd/yyyy)

Signature: _____ Date: _____
(Name as it will appear on LISOM records) (mm/dd/yyyy)

NOTARY

Subscribed and sworn to before me on this _____ day of _____ 20 _____.

Notary Signature: _____

(Notary Seal or Stamp)

PLEASE RETURN ORIGINAL FORM TO THE ADDRESS BELOW

OFFICE USE ONLY

SIS _____

AAMC _____