



ECU

Office of the Registrar | 207 East 5th Street | Mail Stop 518 | Greenville, NC 27858-4353
Office: (252) 328-6747 | Fax: (252) 328-4232 | Email: regis@ecu.edu
www.ecu.edu/registrar

Previously Enrolled Students Name/Address Change Form

CHANGE OF NAME CHANGE OF ADDRESS DATE: _____
Month / Day / Year

Name change requests must include an official document with the new name displayed (e.g. Driver's License, SSN card, Military ID).

ECU ID NUMBER: B _____ TELEPHONE NUMBER _____

PREVIOUS NAME: Mr. Mrs. Miss Ms.

First Middle Other Last

CURRENT NAME: Mr. Mrs. Miss Ms.

First Middle Other Last

NEW ADDRESS:

PO Box/RFD/Street Name and Number City State Zip

I CERTIFY THAT THE ABOVE IS MY LEGAL NAME ACCORDING TO APPLICABLE LAW.

Student Signature: _____ Date _____

PLEASE USE BALL POINT PEN