

CHOSEN NAME FORM



Student ID#: _____

Legal name (first name / last name): _____

Chosen name (first name / last name): _____

Preferred pronouns (optional): _____

RCBC email address: _____

Please indicate whether you would like to update your RCBC email address to reflect your chosen name.

YES NO

(We are only able to update an email address in between semesters.)

*By signing and submitting this form, I authorize RCBC to update my chosen name on my file. This name will not appear on legal documents but will be used where authorized. I understand that this form will become a part of my RCBC record. The form only needs to be submitted once per name change request.

Signature

Date

For more information about chosen name please review the RCBC chosen name website at rcbc.edu/chosen-name.

If you have any questions regarding this form before you submit it, please email studentservices@rcbc.edu to ask any questions you have.

After completing this form, email it from your RCBC email account to registration@rcbc.edu.