



DIRECTORY INFORMATION CHANGE REQUEST

Name _____ Student ID # _____
(Current Name on Record)

Please provide below only the information that has changed. (Parent/Gaurdian information on back side.)
Sign and return to the Registrar's Office. Date Change Effective _____

STUDENT INFORMATION CHANGE(S):

Name Change: _____
NOTE: You must provide a copy of legal documentation for any name change. (Acceptable documentation includes court documents with new name, social security card with new name, license with new name.)

Marital Status Change: ____ Single ____ Married ____ Widowed ____ Divorced
NOTE: You must provide a copy of legal documentation for any marital status change. (Acceptable documentation includes marriage certificate, divorce decree, obituary, or death certificate.)

If Married, Spouse's Name: _____ Was/is NWU student? ____ yes ____ no

Preferred First Name: _____
NOTE: Preferred first name will appear, in addition to legal first name, on class rosters and other WebAdvisor documents.

Gender Change: Male Female
NOTE: You must provide a copy of legal documentation for any gender change. (Acceptable documentation includes license with changed gender, or official state ID with changed gender.)

Permanent Address Change: _____
Address City/State/Zip Code

Local/Current Address Change: _____
Address City/State/Zip Code
Address to be considered preferred for mailing? Permanent Local/Current

Phone # Change: _____
Cell Other: Please Specify

Hometown for press releases: _____

Directory Information Release:
 I do not want my directory information (address/phone #) released off campus.
 I want to remove my directory information hold and allow directory information to be released off campus.

Student's Signature _____ Date _____

Return to: NWU Registrar's Office, Smith-Curtis 206, 5000 St. Paul Ave. Lincoln, NE 68504

FAX: 402.465.2565 EMAIL: registrar@nebrowesleyan.edu

PARENT/GUARDIAN INFORMATION CHANGE(S):

Father/:

Guardian *Prefix (ex: Mr/Dr/Rev)* *First* *MI* *ast* *Suffix*

Address *City/State/Zip Code*

Phone # *-mail*

Mother/:

Guardian *Prefix (ex: Mrs/Ms/Dr)* *First* *MI* *ast* *Suffix*

Address *City/State/Zip Code*

Phone # *Email*

Step-Father:

Prefix (ex: Mr/Dr/Rev) *First* *MI* *ast* *Suffix*

Address *City/State/Zip Code*

Phone # *Email*

Step-Mother:

Prefix (ex: Mrs/Ms/Dr) *First* *MI* *ast* *Suffix*

Address *City/State/Zip Code*

Phone # *Email*

REGISTRAR'S OFFICE USE ONLY:

Name Change in BIO: (Preferred Name & Mailing Name) _____ on File: _____

Address Change in ADSU: _____ Parent Change in PREL: _____

Marital Status Change in BIO: _____ Gender Change in BIO: _____

Directory/Privacy in SPRO: _____