



Request for Change of Name

Admissions & Records Office
1500 College Parkway
Elko, Nevada 89801
(775) 753-2102 Fax (775) 753-2311

I hereby request that my name be changed on the permanent records of Great Basin College. **A copy of verifiable documentation is required; current name on driver's license or court order (e.g. marriage certificate, divorce decree) is accepted.**

Former Name: _____
Last First Middle

Present Name: _____
Last First Middle

Social Security Number: _____ Birth date: _____

Current Address: _____
P. O. Box or Street City State Zip

Phone: _____

Last semester attended at GBC: Fall Spring Summer Year: _____

Reason for Name Change: _____

Student Signature Date

For Office Use Only

S.I.S. Entry: _____
Initials Date