



REQUEST FOR STUDENT NAME CHANGE

DIRECTIONS FOR COMPLETING THIS FORM:

- This form should ONLY be used for SSD students who require a name change to their account.
- Do NOT use a student's SSD online cover sheet when submitting this form as this will reopen the student's case.
- If the name change is significant (i.e. more than just a mistyped letter or changing a nickname to the full name), you must submit a valid photograph with the student's name and at least one of the following forms of identification:
 - School Identification Card
 - Birth Certificate
 - Social Security Card
 - Driver's License
 - Passport
 - Court Order of Legal Name Change
- Complete, sign and fax this form along with the required identification documentation to the College Board's Services for Students with Disabilities Program to **866-360-0114**.
- Please allow 2 to 3 business days for name change requests to be processed.

STUDENT INFORMATION (incomplete forms may delay your request)

School Code: _____ School Name: _____

SSD Number: _____ Date of Birth: ____/____/____ Gender: Male___ Female___

Previous Name: _____
Last First MI

New Name: _____
Last First MI

By providing my signature below, I authorize the College Board to update the student's name on their account. I also attest that all the information provided on this form is true and accurate.

SSD Coordinator Name (required): _____

SSD Coordinator Signature (required): _____ Date: _____

For additional information on name changes, please visit (<http://professionals.collegeboard.com/testing/ssd/forms>)