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Current Name (Last Name, First Name Middle Name)

Birthdate

Please indicate your full legal name below:

Please indicate any additional names (nicknames, maiden name, etc.) that your transcripts, test scores or other documents may be submitted under:

By typing my name below, I hereby certify that to the best of my knowledge, the information furnished above is true and complete. I certify that the name indicated above is my current full legal name.

Applicant Signature

Date

Email complete form to:

Undergraduate Applicants:
apply@colorado.edu
Subject Line: Legal Name Request Form

Graduate School Applicants:
gradprocessing@colorado.edu
Subject Line: Legal Name Request Form

Or

Mail complete form to:

Undergraduate Applicants:
University of Colorado Boulder
Office of Admissions
552 UCB
Boulder, CO 80309-0552

Graduate School Applicants:
University of Colorado Boulder
Graduate Admissions
553 UCB
Boulder, CO 80309-0553