

Name Change Affidavit and Certification

_____			_____
Student Name (please print)			Date
_____			_____
School Student Currently Attends			Student ID #
_____	_____	_____	_____
Address	City	State	Zip Code
_____		_____	_____
Parent(s)/Legal Guardian(s) (please print)		Primary Phone #	Secondary Phone # (optional)
_____		_____	_____
Address (if different than above)		City	State
_____		_____	_____
E-mail (optional)		_____	

As the parent(s)/legal guardian(s), and pursuant to Utah Administrative Code R277-419-10 (4), I hereby aver that there is a compelling need to protect my child by using a name other than what appears on the birth certificate, and authorize Jordan School District to record the name of the student as follows:

A. From (current name on birth certificate):

B. To (name by which student is to be recorded on District records):

TO BE SIGNED BEFORE A NOTARY:

The undersigned parent(s)/legal guardian(s) and student accept(s) that the name identified in (B) will be used as the official name designated on Jordan School District official transcripts and records. The undersigned also accept(s) sole responsibility for this name change, that this form does not constitute a legal name change, and the terms and conditions of this Affidavit.

Parent(s)/Legal Guardian(s) Name (please print)

Parent(s)/Legal Guardian(s) Signature

Student Name (please print)

Student Signature

State of: _____

County of: _____

Subscribed and sworn to before me by _____, the parent(s)/legal guardian(s) and student, on this _____ day of _____, 20_____.

Notary Public: _____

My Commission Expires: _____