

# CHOSEN NAME FORM



**Student ID#:** \_\_\_\_\_

**Legal name** *(first name / last name):* \_\_\_\_\_

**Chosen name** *(first name only):* \_\_\_\_\_

**Preferred pronouns** *(optional):* \_\_\_\_\_

**RCBC email address:** \_\_\_\_\_

**Please indicate whether you would like to update your RCBC email address to reflect your chosen name.**

YES     NO

*(We are only able to update an email address in between semesters.)*

\*By signing and submitting this form, I authorize RCBC to update my chosen name on my file. This name will not appear on legal documents but will be used where authorized. I understand that this form will become a part of my RCBC record. The form only needs to be submitted once per name change request.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

For more information about chosen name please review the RCBC chosen name website at [rcbc.edu/chosen-name](http://rcbc.edu/chosen-name).

If you have any questions regarding this form before you submit it, please email [studentservices@rcbc.edu](mailto:studentservices@rcbc.edu) to ask any questions you have.

After completing this form, email it from your RCBC email account to [registration@rcbc.edu](mailto:registration@rcbc.edu).