

University of Northern British Columbia

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> Students & Alumni: 250-960-6300 Staff: 250-960-5521

Faculty: 250-960-5605
Donors: 250 960-5750 or 1-866-960-5750

UNBC #							Date of Birth	DD/MM/YYYY								
E-mail Address		•			•		Telephone #				-			-		
Street Address								•					·	•		
City/Town							Province									
Country							Postal Code	de								
Prior Name	Last	Last				Fir	First Middle/			le/Initia	nitial			Mrs.	Ms.	Miss
New Name	Last	Last				Fir	st	Middle/I			al		Mr.	Mrs.	Ms.	Miss
Emergency C	ontact	La	ast			•	First			N	Middle	/Initial	Mr.	Mrs.	Ms.	Miss
Relationship	Relationship to you						Phone (day)		Phone (eve)							
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Initials: ___

Processed By:

UNBC ID Card: If you require a new student / employee card, please contact the UNBC Cashiers.

Date:

You are advised that the use of information provided on this Change of Name Request, and other information placed in a UNBC record, complies with the BC Freedom of Information and Protection of Privacy Act, and with the policies and procedures of the University of Northern British Columbia. In addition to internal administrative uses this information may also be used in strict confidence in University research and planning. Certain information

s provided on a confidential basis to Partner Institutions, to Statistics Canada as governed by the <i>Canada Statistics Act</i> , and to the BC Government. The internal use of personal records, and the obligatory reporting of data to external bodies, respects the absolute confidentiality of personal information.								
I have read and understand the above statement.								
Signature	 Date							
FOR OFFICE USE ONLY								
Supporting Documentation: Birth Certificate	☐ Marriage or Name Change Certificate ☐ Other:							

☐ IT Services Notified