

## Change of name

Initials: \_

**AS-66** 

Applications and Admissions The University of Auckland Private Bag 92019 Auckland Mail Centre 1142, NZ

Email: admission@auckland.ac.nz Phone: +64 9 373 7599

Personal details - Previous name						
	Family Name:					
	First Name/s:			Number:  Date of Birth:		
_ 2.	2. Name change request					
	NEW Name: First name(s)	Midd	dle name(s)	Fam	Family name(s)	
	Title (select one)					
	☐ Mr ☐ Mrs ☐ Miss	☐ Ms	☐ No Title	Other		
Do	you require notification once this change $ \text{Yes } \bigcirc   $		I so that you can obtai	n a new ID card?		
In	<b>nportant:</b> If you have applied for to process your name change readsentia').					
Important: We cannot accept name change documents via email.						
Th	ridence required e evidence must <i>link both the previ</i> by be required.	<b>ous name</b> and t	<i>he <b>new name</b>;</i> this	means a combina	ation of documents	
	<ul> <li>ase submit certified documents that hted. Certified true copy" by one of t</li> <li>Justice of the Peace</li> <li>Solicitor of the High Court</li> <li>Notary Public</li> </ul>		of the original, end	orsed with the sta	atement "Original	
Certified documents must be stamped and include the certifier's full name, signature, title and the date.						
	ernatively, you can bring your original mpus, Auckland (entrance past the G			ıl, Alfred Nathan H	House, City	
A	cceptable evidence includes					
<ul> <li>Marriage certificates</li> <li>New Zealand birth certificates (this must include your previous name and new name).</li> <li>Name change certificates</li> <li>Dissolution documents</li> <li>Name change by statutory declaration</li> </ul>						
3. Your signature:						
				Date:		
OF	FICE USE ONLY:					

Date: \_