



LEGAL NAME AND/OR GENDER DESIGNATION CHANGE

Please note processing times may vary and it may take up to **two business weeks** to complete. If you want to update your [preferred name](#), please do so on your [Aurora Account](#). If you are a staff member please contact [Human Resources](#) to update your records.

STUDENT INFORMATION

Student Number: _____ Date of Birth: _____ Phone Number: _____

NAME CHANGE INFORMATION

The current spelling of your name as it appears in your University of Manitoba records (you can see this on your Aurora account).

First Name(s)

Middle Name(s)

Last Name(s)

Your full legal name as it should now appear in your University of Manitoba records (this must match your name as it appears on your supporting documentation). Please print clearly using upper and lower case letters. If applicable, clearly indicate all diacritical marks such as accents, umlauts, or any other special characters.

First Name(s)

Middle Name(s)

Last Name(s)

NAME CHANGE DOCUMENTATION

If your name has been legally changed please provide:

- ☐ Government issued Change of Name Certificate
OR
☐ Government issued marriage certificate **and** birth certificate **and** a government issued ID (ex. driver's license) showing your current full name.
OR
☐ Government issued divorce decree **and** birth certificate **and** a government issued ID (ex. driver's license) showing your current full name.

If your name needs to be **CORRECTED** in your UM records (spelling error, adding or deleting a name) please provide:

- ☐ Birth Certificate
OR
☐ Government issued Change of Name Certificate
OR
☐ Government issued study permit and passport (*for international students only*)
OR
☐ Immigration documentation or citizenship paper or permanent resident card.

GENDER DESIGNATION

If you have changed your designated gender, please indicate your gender below:

- ☐ Female ☐ Male ☐ Non-binary (Trans, Transgender, Two-spirited and/or Intersex)

STUDENT DECLARATION AND SIGNATURE:

I understand that if my personal identification does not match the name I wish to place on my UM records, it is my responsibility to prove that I am the individual who belongs to this name.

I understand that my request will not be processed in the event that there is illegible, incomplete, or missing documentation.

Signature: _____ Date: _____

Notice Regarding Collection, Use, and Disclosure of Personal Information by the University

Your personal information is being collected under the authority of The University of Manitoba Act. The information you provide will be used by the University for the purpose of updating your personal records with your new legal name or designated gender. Your personal information will not be used or disclosed for other purposes, unless permitted by The Freedom of Information and Protection of Privacy Act (FIPPA). If you have any questions about the collection of your personal information, contact the Access & Privacy Office (tel. 204-474-7559), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.