

**STUDENT DEMOGRAPHIC INFORMATION**

_____ LAST NAME		_____ LEGAL FIRST NAME	
_____ STUDENT ID #	_____ MAJOR	_____ START DATE	_____ EXPECTED GRAD DATE
<b>PERMANENT ADDRESS INFORMATION</b>			
_____ STREET		_____ CITY	_____ STATE    _____ ZIP
_____ PHONE NUMBER		_____ E-MAIL	

**CHOSEN NAME AND PRONOUN INFORMATION**

EFFECTIVE DATE: \_\_\_\_\_

NAME AS IT CURRENTLY APPEARS IN THE DIRECTORY  
\_\_\_\_\_

NAME AS YOU WOULD LIKE IT TO APPEAR  
\_\_\_\_\_

MY CHOSEN PRONOUNS AS I WOULD LIKE THEM TO APPEAR IN THE DIRECTORY \_\_\_\_\_

I WOULD LIKE TO CHANGE MY OLIN EMAIL ADDRESS TO REFLECT MY CHOSEN NAME  
\_\_\_\_\_ YES                  \_\_\_\_\_ NO

<b>STUDENT SIGNATURE:</b> _____	<b>DATE:</b> _____
------------------------------------	-----------------------

<b>Approval Dean of Student Affairs:</b> <b>DATE:</b> _____
-------------------------------------------------------------------