Preferred Name Request Form

Complete this form if you would like MnSCU System/Winona State University to use a preferred name for you in its records, consistent with System Procedure. If you complete this form, your preferred name will appear in your campus email address, system directories, class roster and other Winona State University records as technically feasible except where your legal name is required. You may request a preferred first, middle and/or last name. Winona State University reserves the right to deny any preferred name for misuse, including but not limited to, misrepresentation, attempting to avoid legal obligation, or the use of highly offensive, derogatory or discriminatory names. You may change your preferred name by completing this form again; individuals do not have the ability to change a preferred name independently. You may be asked to show photo identification for security purposes.

### Legal Name

<table>
<thead>
<tr>
<th>Legal First Name:</th>
<th>Legal Middle Name:</th>
<th>Legal Last Name:</th>
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<tbody>
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Warrior ID or StarID:

By completing the information below, you are requesting your preferred name appear as listed at any MnSCU institution where you have an educational or employment relationship, and where the legal name is not required for business or legal reasons. Note that presentations of preferred name will be subject to the availability of technical resources at individual institutions.

By your signature below, you affirm that this application is made for the purpose of your employee and/or academic record, and that you intend to use this name consistently for these purposes within the Minnesota State Colleges and University system. You also affirm that you accept any obligations to or within the Minnesota State Colleges and University System under either your legal or preferred name.

### Preferred Name

Please complete each of the fields below as you would like them to be displayed. Where technically feasible, this is the name that will be displayed within MnSCU records where legal name is not required.

<table>
<thead>
<tr>
<th>Preferred First Name (Optional):</th>
<th>Preferred Middle Name (Optional):</th>
<th>Preferred Last Name (Required):</th>
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Signature of Requestor: ___________________________  Date: ______/____/____

Email Address of Requestor for Confirmation of Request

Once your request has been added to our system, you will have the option to request a new Warrior ID card. However, you will be responsible for the cost of the new card.

### For Office Use ONLY

Photo ID Verified By: ___________________________  Date: ______/____/____

A person’s name is used for identity in many locations in administrative and academic systems. Responsibility for maintenance and enhancement of these systems is shared by the staff of the MnSCU system office and the colleges/universities. Shortage of technical resources may delay the implementation of preferred name usage in individual instances.

Request Approved By: ___________________________  Date: ______/____/____