



Weill Cornell Medicine-Qatar

Change of Name Form

Directions:

1. Print the Change of Name form
2. Complete the Change of Name form
3. Submit the completed Change of Name form to the Office of the Registrar along with a copy of your passport that shows your new name.

Indicate your current program and year: Foundation_____ Premed_____ Medical Class of _____

CURRENT NAME ON RECORD (PRINT CLEARLY)

WCMCQ ID#: _____

First Name: _____

Last Name: _____

Middle Initial: _____

NEW NAME TO BE ON RECORD

First Name: _____

Last Name: _____

Middle Initial: _____

Student Signature

Date

FOR OFFICIAL USE ONLY

- Student Data Base: _____ PeopleSoft : _____
- Premed: _____ Med Ed: _____ Finance: _____ PA: _____
- IT: _____ FM: _____ Dean's Office: _____ ASA: _____

Processed by: _____ Date: _____