

HOPE CHARTER SCHOOL/
LEGACY CHARTER HIGH SCHOOL
Request for Parent/Student Name Change

**A CHANGE OF PARENT NAME REQUIRES A COPY
OF THE NEW SOCIAL SECURITY CARD.**

**A CHANGE OF STUDENT NAME REQUIRES A
BIRTH CERTIFICATE OR ADOPTION PAPERS.**

Date _____

DATA
This change is for <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Student (check all that apply)
Student Name:
Student Grade:
Parent NEW Last Name (as indicted on social security card):
Parent First Name:
Student NEW Name (as shown on birth certificate or adoption papers):
Telephone Number: ()
Email Address:
Type of documentation attached: (MUST accompany this form.) <input type="checkbox"/> Social Security Card <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Adoption Papers

Parent Signature

Date