



Post University Chosen Name and Email Change Form

This form is used by students to change their Post University identifiers to reflect their chosen first names and email addresses.

Please complete this form in its entirety, sign and date it, and return it to Barbara Alenckis via e-mail at balenckis@Post.edu or faxed to 203.841.1174. Please write legibly.

Please allow 5 business days for processing.

For further information regarding the Post University Gender Identity Policy and information on updating preferred pronouns, please see:

<https://post.edu/student-services/student-affairs/gender-identity-policy/>

Questions? Contact Barbara Alenckis, Director of Title IX and Disability Services, at 203.596.6027 or balenckis@Post.edu.

Student's Legal Name _____

Student's Chosen Name _____

Date of Birth _____

Student ID Number _____

Current Post University Email Address: _____

STUDENT'S SIGNATURE

DATE

NOTE: If you are in the Work Study Program, or are employed by Post University as a "student worker," you must also report your new email address to the Post University Payroll Office.