



Preferred Name / Gender Marker / Pronoun Update Form

Student ID #: _____ School: _____

Current Student Name: _____
First Middle Last

Date of Birth: _____ Sex Assigned at Birth: Female Male
(Legal Sex Required by State of MN) *Check One*

Change the Following in Student Record (leave blank if change is not applicable)

Preferred Name: _____
First Middle (Optional)

Gender Identity: Female Male X: Non-Binary Not Designated
Check One

Pronouns: _____

- By submitting this form, I am requesting that Minneapolis Public Schools change the name and/or gender of the student listed above.
- These change(s) are being requested because the student consistently identifies as the name/gender requested above.
- I understand that this form does not constitute a legal name and/or gender change; rather it only changes the name and/or gender of the student as reflected in Minneapolis Public Schools student information system.
- I understand that the State of Minnesota presently requires a gender of either "Female" or "Male" for state reporting purposes.
- I understand that the Gender Identity will only be used within Minneapolis Public Schools.
- I understand that the student's original name/gender/pronoun will be retained in the student record system.
- I authorize the release of the student's original and updated name/gender to other authorized parties as part of student records requests.

Student and/or Parent/Guardian Signature(s)

Submit this form to the main school office. If you have questions, please contact the school office.

SCHOOL OFFICE: Send the completed form to Student Accounting at MARSS@mpls.k12.mn.us.
If the student wishes to have their username/email updated, please submit an eTicket with a copy of this form.