Request for First Name and/or Gender Change in Beaverton School District Student Records

When a parent/legal guardian, a student who is 18 years of age or older, or a student who has graduated from the Beaverton School District wishes to be identified by a different first name and/or gender from their legal name and/or gender, they may request changes in the Student Information System. This request should be made by contacting their school office and completing the information below. This request will be forwarded to the District Information Technology staff for communication with the Oregon Department of Education, as needed. If you change your name legally, you do not need to complete this form to request first name and/or gender change. Bring the proof of legal name and gender change to the school, and the registrar at the school will update the information.

Upon completion of this form, the first name and/or gender will be changed in the District’s Student Information System, and the change will reflect in future generated reports. Records sent to the Oregon Department of Education will be based on the student’s preferred first name and/or gender. A record of the legal name and biological gender will be recorded in the Student Information System but will only be accessible by District staff in compliance with state and federal privacy laws. Legal documentation is only required in order to change a student’s last name for currently enrolled students.

I am a (check one):
☐ parent/guardian of a current student
☐ current student and older than 18
☐ graduate of BSD (must be older than 18)

I request my student or myself be known by a different first name ______ (Initial Here) and/or different gender (F/M/X) ______ (Initial Here) than the legal first name and/or biological gender.

_____________________________   ________________________________
School Attending                Current Grade Level or Year Graduated

_____________________________
Student’s Legal Last Name

_____________________________
Student’s Legal First Name

_____________________________
Student’s Preferred First Name

_____________________________
Birth Date

_____________________________
Student ID number

Student’s biological gender:   Student’s preferred gender:
_____ Female (F)   _____ Female (F)
_____ Male (M)    _____ Male (M)    _____ Non-Binary (X)

District Goal: WE empower all students to achieve post-high school success.

The Beaverton School District recognizes the diversity and worth of all individuals and groups. It is the policy of the Beaverton School District that there will be no discrimination or harassment of individuals or groups based on race, color, religion, gender, sexual orientation, gender identity, gender expression, national origin, marital status, age, veterans’ status, genetic information or disability in any educational programs, activities or employment.
This section only applies to the parent/guardian of a current student and a current student who is 18 years of age or older.

Dear Parent/Guardian or student,

Please be aware that institutions outside of Beaverton School District such as college admissions offices, Social Security Administration, military, and Federal Student Aid (which manages FAFSA – Free Application for Federal Student Aid) may require transcripts or other documents be provided under your legal name and/or gender. By agreeing to the name and/or gender change below, you are also acknowledging that it will be your responsibility to submit records in the manner required by the receiving institution. This may mean requesting that your name and/or gender be changed back to the legal name/gender in Beaverton School District records. Please contact the school registrar to initiate this record change.

Parent/Guardian Name (Print)   Signature   Date

Student Name (Print)   Signature   Date

Received by (Print)   Date

* * * * * * * *

This section only applies to the graduate of BSD who is older than 18.

Dear Graduate,

Please be aware that this request to amend your school records requires legal documents that reflect your changes name and gender. These documents include: driver’s license, birth certificate, and/or social security card. By agreeing to the name and/or gender change below, you are also acknowledging that it will be your responsibility to provide necessary documents.

Student Name (Print)   Signature   Date

Received by (Print)   Date

* * * * * * * *

Copies to:

- [ ] Original filed in CUM folder
- [ ] Copy to the person completing the form
- [ ] Help Desk Ticket to IT
- [ ] Special Education Records department (for currently enrolled special education eligible student)

Updated: June 14, 2019