

Change/Correction to Student Personal Details Declaration

PLEASE COMPLETE IN BLOCK CAPITALS

This declaration form is provided to accommodate transgender or otherwise gender-transitioning students who wish to amend the name and/or gender on their student record and do not have access to otherwise supporting documentation.

This form must be completed in conjunction with your personal tutor/ the Postgraduate Advisory Service/ the Senior Tutor's Office, as appropriate.

Please complete this form, along with co	npleting the 'Change of Personal Details Form' a	nd submit
both forms to the Academic Registry Serv	-	
TCD STUDENT ID NUMBER		
TCD STODERT ID NOWIDER		
TUTOR/PAS/STO		
_	e of the application form and discussed my requiese regulations. I understand that the amended	•
appear on my record and any future doc In the event that supporting documentat Academic Registry to include on my reco	on is available at a later date, I will submit a cop	y to the
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Please return completed declaration form **and** application form to the Academic Registry Service Desk.

Academic Registry, Watts Building, Trinity College Dublin TEL: + 353 (0) 1 896 4500 EMAIL: academic.registry@tcd.ie