

# CHOSEN NAME AND PRONOUN ADVOCACY LETTER

#### Instructions

• Submit the completed form to your instructor in person or via email.

## STUDENT DECLARATION

Dear Professor,

This form is to notify you of my Chosen Name and Pronouns. I request for my Chosen Name and Pronouns to be used in class, in email correspondence, and/or other school related activities. Thank you for your understanding.

Student Chosen Name:				
	Last Name	First Name	Middle Name	
Student Pronouns:				
Student Legal Name:				
	Last Name	First Name	Middle Name	
Student ID#:				
COURSE INFORMATION				
Prefix (i.e.: MATH-005):			Section # (i.e.: 3325):	
Term: Yea	ir:			

### INSTRUCTOR RESOURCES

## Advocacy Letter Information

COD understands the importance of a student's chosen identity being recognized by faculty, staff, and other students. As students may have applied to COD with a legal name that no longer reflects their identity, those students can request to be identified by their chosen name in certain campus settings.

#### **Questions?**

Additional information or questions regarding Chosen Name requests may be referred to the Admissions & Records Office by calling 760.773.2516 or via email at enroll@collegeofthedesert.edu.