



STATE OF NEW MEXICO  
PUBLIC EDUCATION DEPARTMENT  
300 DON GASPAR  
SANTA FE, NEW MEXICO 87501-2786  
Telephone (505) 827-5800  
[www.ped.state.nm.us](http://www.ped.state.nm.us)

HOWIE C. MORALES  
LIEUTENANT GOVERNOR

MICHELLE LUJAN GRISHAM  
GOVERNOR

### REQUEST FOR NAME CHANGE

(Please Print or type)

License Number: \_\_\_\_\_ SSN: \_\_\_\_\_

Name to appear on License(s):

\_\_\_\_\_

Current address (license will be mailed to this address) \_\_\_\_\_

\_\_\_\_\_

Please include a copy of one of the **legal documents** listed below **AND** a current **\*Photo ID\*** that has the requested name reflected on it. **\*driver's license or passport copy**

**Acceptable documents:**

- copy of **marriage license** indicating the legal name change
- copy of a **divorce decree** indicating the legal name change
- copy of **certified court order** indicating the legal name change

\_\_\_\_\_  
Signature (required for processing)

\_\_\_\_\_  
(Date)

**Return Form to:**

NM Public Education Department

Attn: Professional Licensure

300 Don Gaspar

Santa Fe, NM 87501

Fax to: 827-1449

Or you can scan Email to: [licensureunit@state.nm.us](mailto:licensureunit@state.nm.us)