



Statement of Name Change

Please complete this form if you would like the Ministry of Education to change your name in our records. You may submit it to us by mail, by email at trb.certificateservices@gov.bc.ca, or by fax at 604 775-4859.

YOUR INFORMATION Date of Birth (YYYYMMDD) File/Certificate No.

Given Names Surname

Previous Surnames

Mailing Address

Email Address Home Telephone Number (include area code) Work Telephone Number (include area code)

STATEMENT OF NAME CHANGE INFORMATION

Please check one of the following:

I would like the Ministry to revert to using my birth name. I do not need to provide additional documentation unless the Ministry specifically requests it.

I would like the Ministry to use my new name. I have attached a verified copy of my marriage certificate or legal name change document as proof of my new name. (Copies of name documents must be verified by a notary public, lawyer, or current BC Ministry of Education certificate holder. In the case of a certificate holder, s/he must write his/her full name, certificate number and signature on the photocopy.)

I most recently used the name:

Title (Mr. / Mrs. / Ms. / Miss) Given Name Surname

I would like the Ministry to use the following name:

Title (Mr. / Mrs. / Ms. / Miss) Given Name Surname

REQUEST TO CHANGE NAME

I hereby request that the Ministry change my name in its records and begin using the above-mentioned name effective immediately:

Signature Date Signed

May 2015