



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

RYAN STEWART, Ed.L.D.
SECRETARY OF EDUCATION

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: 827-5820

Or you can scan Email to: licensureunit@state.nm.us