



## NAME CHANGE REQUEST

This form should be used by the employee to change his or her legal name. Complete the information requested below and attach a copy of documentation supporting the legal name change. Acceptable documentation includes: birth certificate, divorce decree, social security card, driver's license, or court documentation.

Forward the completed form and supporting documentation to **HR ENTRY SERVICES UNIT, ESC OFFICE, HUMAN RESOURCES, 770 WILSHIRE BLVD., LOS ANGELES, CA 90017.**

1. My name now appears on District records as:

\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_  
 First                                      Middle                                      Last                                      Employee Number

2. Please change my name on District records to:

\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_  
 First                                      Middle                                      Last

3. \_\_\_\_\_ (for notification of change completion)  
 Email Address

**Do not use your changed name for District purposes until you receive notification that District records have been updated.**

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

<b><u>FOR OFFICE USE ONLY - SAP RECORD UPDATE</u></b>	
_____	_____
Date	By