



# Massachusetts Department of Elementary and Secondary Education

Office of Educator Licensure  
75 Pleasant Street, Malden, Massachusetts 02148

Telephone: (781) 338-3000  
TTY: N.E.T. Relay (800) 439-2370

## Request for a Name Change / Hard Copy License

Please check all that apply:

- Request for a Name Change  Request for a Hard Copy License

Please complete all areas of this form so that we may process your request in a timely manner. Please type or print.

\_\_\_\_\_  
Current Last Name                      Previous Last Name                      First Name                      MI

\_\_\_\_\_  
Street Address and Apartment Number (if any)

\_\_\_\_\_  
City    State                      Zip Code

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Date of Birth (Month/Day/Year)                      Social Security Number or MEPID                      MA Educator License Number

### For a Name Change:

- Please enclose valid evidence (e.g. copy of marriage license or SS # card) to change the name in your ELAR profile.

### For a Hard Copy License:

- **\$25.00** fee: please enclose a **certified check or money order** payable to the **Commonwealth of Massachusetts**. If you prefer to use **MasterCard or Visa** please use the Office of Educator Licensure Charge Form. Please note that we **do not** accept personal checks.

### **Please print out this form and sign below. Please send to:**

Massachusetts Department of Elementary and Secondary Education  
Office of Educator Licensure  
75 Pleasant Street  
Malden, MA 02148-4906

\_\_\_\_\_  
Signature (Current Name)

\_\_\_\_\_  
Date

