



Name Change Request Form

To change your legal name, please send a scanned copy of a valid/unexpired government-issued document ID such as **Driver's License, Passport or Marriage Certificate**.

Exam candidates: If you are scheduled to take an exam, please submit your request to info@hrci.org at least five (5) business days before your exam appointment.

Certified professionals: If you already have one of our certifications, please submit your request to info@hrci.org to be processed.

PRIMARY EMAIL ADDRESS

NAME (AS CURRENTLY FOUND IN OUR DATABASE)

NEW NAME REQUESTED

SIGNATURE

DATE

The HR Certification Institute does not return documents. Do not send originals, certified or notarized documents. Once processed, the legal documentation will be destroyed for your protection.

Please submit by mail to:

Email: info@hrci.org

OR

Mail: HR Certification Institute
Name Change Request
1725 Duke Street, Suite 700
Alexandria, VA 22314 USA