



Name Change Form

Name changes must be accompanied by **one from each section:**

One certified document required:

- A Certified Divorce Decree
- A Certified Marriage Certificate
- A Court-issued Order of Name Change.

One official ID required:

- Copy of your updated Driver's License
- Copy of your updated State Identification
- Copy of your updated Social Security Card (please darken or cover the first 5 digits of the social security number prior to submitting)

You may submit your documentation via fax at 773-553-1113 or scan, employeerecords@cps.edu



Name Change Form

Employee ID:

Former Name:

Check One: Ms. Mrs. Mr. Dr.

Last Name

First Name:

MI:

New Name:

Check One: Ms. Mrs. Mr. Dr.

Circle One: Married, Divorced, Single, Widowed

Last Name:

First Name:

MI:

Check which document you are submitting:

- A Certified Divorce Decree
- A Certified Marriage Certificate
- A Court-issued Order of Name Change.

Check which form of ID you are submitting:

- Copy of your updated Driver's License
- Copy of your updated State Identification
- Copy of your updated Social Security Card (please darken or cover the first 5 digits of the social security number prior to submitting)

Signature: _____ Date: _____

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Office Use

Document Verified: _____ Date: _____ By: _____

Please submit the form and documentation together to:

Employee Records
2651 W Washington Blvd,
Chicago, IL 60612 GSR # 034
Email: employeerecords@cps.edu
Fax: 773.553.1113
Phone: 773.553.HR4U