



HUMAN RESOURCES

Personal Information Change Request

This form along with required documentation allows you to make name changes for reasons such as marriage, divorce, court orders, spelling errors, adoption, and gender transition.

Please do not send social security information via email. We have a secure transfer system for person to person email communication. For questions, please contact our office at 828-262-3187 or email human-resources@appstate.edu for more information.

Name Change Details

Current Name:

FIRST MIDDLE LAST

New Name:

FIRST MIDDLE LAST

Effective Date of Change:

Employee Approval

I understand that my previous name(s) will be retained for record keeping purposes.

Banner ID # Phone: Email:

Signature of Employee: Date:

By signing above, you are certifying that the name above is the legal name that appears on your social security card.

Legal Document Options

Submit at least one form of legal documentation from the list below:

Social Security Card

Valid US Passport

Please upload documents to [FileShare](#) and send to eirichjd@appstate.edu. For instructions on how to use FileShare, please visit the [Confluence page](#). The new name must be listed on the document and the document must be signed, if applicable.

Gender Change: My gender has changed. Please update my record to reflect the following new gender.

Male

Female

Please provide a:

- Valid drivers license or passport indicating the new gender

This form will not change your Benefit Information. Contact the Benefits Office 828-262-3187 to make this change.