

Employee Name Change

*Please complete this form. Attach appropriate documents to the back of this form. Once you have completed the form you will need to return it to **3300 SW 29th Street, Suite 100, Topeka, KS 66614** or you may fax to: **785-273-3816**.*

Employee's Current Name: _____

Employee's Last Four of Social Security Number: _____

Employee's New Name: _____

Fill in the CIRCLE that applies to you and provide the correct documentation.

- ☐ Correct error in spelling
 - ☐ Birth Certificate, State ID, US Military ID, Passport, U.S. Resident Alien Card
- ☐ Change due to marriage
 - ☐ Marriage Certificate
- ☐ Change due to divorce
 - ☐ Divorce Decree
- ☐ Legal Change of Name
 - ☐ Court petition for Name Change, U.S. Naturalization Certificate.

Employees Signature: _____ Date: _____