

# Name Change Form



Use this form to request the Harrisburg School District to change your name on official records. Documentation is required for changes to your name.

Statement of Responsibility

I assume responsibility for the consequences or problems that may occur as a result of this change of my name. There is no intent on my part to defraud the Harrisburg School District.

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**Previous Name:** \_\_\_\_\_

**New Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Social Security #:** \_\_\_\_\_

**The following documentation (copy) is required to provide evidence of legal name change. This form along with the documentation noted below should be sent to Human Resources:**

Valid Driver's Licence      **AND**       Social Security Card

**or**

State Issued ID

**or**

Military ID

**or**

Passport