

Remote Name Change Instructions

For any Name Change Request, our procedures require verifying original ID (Social Security Card, Marriage Certificate, Driver's License) which reflects your name change to verify its validity.

Please complete the (Name Change Form) and note if there are any specific requests connected to your name change, such as requesting a new WOU ID Card, email update, etc.

- Presenting Documents in person: Feel free to visit our office.
- Mailing: Notary required

Please have a Notary complete the **Affidavit of True Copy** form in the second page, which can be used and attached to a notarized photocopy of your ID document.

Mail the completed form and notarized copy of id to: **Human Resources - 345 Monmouth Ave, Monmouth Oregon 97361**

You are responsible for any notary service, copying, or mailing cost for of your name change. If you or the Notary Public have any questions regarding completing the Name Change Form please contact us at 503-838-8490 or hr@wou.edu



Affidavit of True Copy

State of:					
County of:					
I,		, certify that on thi	isday	of	<u>-</u>
	(Notary Name)		(Day)	(Month)	(Year)
(Pers	son Presenting Documents	physically μ ts)	presented to	me the follow	ving document(s):
Document 1:	Type of Document	t:			
	Document Number	er:			
	Expiration Date (if	f applicable):			
Document 2: (if applicable)	~ ~	t:			
(,, _{e,b,t}	-	er:			
	Expiration Date (if	f applicable):			
I certify the at	ttached photocopie	es to be a complete, ex	xact and true	e copy of thes	e documents.
	(Notary Si	ignature)			
My Commissio	on Expires:		Notary S	Stamn	
			Notary 5	tamp	