



Florida Department of Law Enforcement

# NAME CHANGE APPLICATION

Incorporated by Reference in Rule 11B-27.002(2)(b), F.A.C.



**CJSTC**  
**79**

Please type or print in black or blue ink and use capital and small letters for names, titles, and addresses

Use this form when an officer's official name changes because an officer marries ( include hyphenation, if any), an officer obtains legal name change through court action, or a discrepancy occurs in the officer's name, such as spelling, etc.

1. Last Four Digits of Social Security Number: \_\_\_\_\_

2. Officer's Previous Name: \_\_\_\_\_  
Last First MI

3. Officer's New Name: \_\_\_\_\_  
Last First MI

4. Agency ORI: FL: \_\_\_\_\_  
Enter the last seven digits of the originating agency's identifier number.

5. Agency Name: \_\_\_\_\_

6. Attach supporting documentation and maintain on file a copy of marriage license, divorce decree, birth certificate, naturalization certificate, current U.S. passport, or legal name change documents to support the officer's name change.

- Marriage
- Divorce
- Legal name change through court process
- Name entered incorrectly into ATMS
- Other

Agency Administrator or Designee's Name (Please Print Legibly)

\_\_\_\_\_  
Agency Administrator or Designee's Signature

\_\_\_\_\_  
Date Signed

## AGENCY REQUIREMENTS

Submit the completed name change form and attachments to the following address: Florida Department of Law Enforcement, Criminal Justice Professionalism Program, Post Office Box 1489, Tallahassee, Florida 32302-1489, Attention: Records Section. Fax Number 850-410-8605.