



## Notification of Name Change

(REV. 01/21)

### Overview

State Fire Training may recognize a name change by an applicant or individual if the revised name is now the legal name for all purposes and if the change is not made for fraudulent and/or deceptive purposes.

### Personal Identification

Name on SFT Record: \_\_\_\_\_

SFT ID Number: \_\_\_\_\_

SSN (last 4 digits) \_\_\_\_\_

Birth Date: \_\_\_\_\_

Phone (Mobile): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

### Name Change Information And Documentation

#### Section A: New Legal Name

First Name:	Middle Name:	Last Name:

#### Section B: Documentation Requirements

Applicant shall submit a photocopy or electronic copy of the required documents:

1. A current government issued photographic identification (e.g., driver license, passport, military ID card, Permanent Resident card)
2. Proof of name change by including **one** of the following additional legal documents:
  - a.  Certified Court Order/Decree
  - b.  Marriage Certificate
  - c.  Dissolution of Marriage (Divorce)
  - d.  Correction (submit government issued photographic identification only)

### Submission Instructions

Submission of this form and supporting documentation will serve as a notification of name change within the SFT User Portal and all associated training and certification data within the personnel record.

1. Applicant mails the Notification of Name Change Application and supporting documentation to:  
State Fire Training, Notification of Name Change, PO Box 944246, Sacramento, CA 94244-2460.
2. State Fire Training conducts an application review:
  - a. If the application meets the requirements, the requested personal information will be updated and a confirmation notification will be sent or issued to the applicant.



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- b. If the application does meet the eligibility requirements, SFT will not apply a name change and a denial/deficiency notification will be issued to the applicant.

### Authority

I, the undersigned, am the person applying for the name change. I hereby certify under penalty of perjury under the laws of the State of California, that all information contained in this application is true in every respect. I understand that misstatements, omissions of material facts, or falsification of information or documents may be cause for rejection and/or additional recourse. I hereby certify that the name change is not made for fraudulent/deceptive purposes.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_