



# TEXAS STATE BOARD OF EXAMINERS OF PSYCHOLOGISTS

333 Guadalupe, Suite 2-450  
Austin, Texas 78701  
Tel.: (512) 305-7700  
Fax: (512) 305-7701

For Agency Use Only

## CHANGE OF NAME OR ADDRESS FORM

### Change of Name:

*You must include a copy of a current driver's license, social security card, marriage license, divorce decree or court order setting forth a change of name. See Board rule 461.6.*

<b>License Number</b>	
<b>Previous Name</b>	
<b>Current Name</b>	

### Request for Updated Permit or License, and Associated Fees

*Please make your check, cashier's check, or money order payable to "TSBEP"*

<input type="checkbox"/> I am requesting a new renewal permit reflecting my name change.	<b>\$10</b>
<input type="checkbox"/> I am requesting a new calligraphy license reflecting my name change.	<b>\$25</b>

### Change of Public Address:

**Pursuant to Texas Board rule 461.6, an applicant or licensee is responsible for keeping his or her professional file updated. All changes must be reported to the Board in writing within 90 days. The address and phone number you designate below is the address and phone number which we will release in response to public inquiries and is the address and phone number the Board will use for all contacts to you regarding your license. If you change your address or phone number before your next renewal, it is your responsibility to notify the Board of the change in writing.**

<b>NAME:</b> Last                      First                      Middle	<b>PHONE:</b>
<b>ADDRESS:</b>	<b>LICENSE NUMBER(S):</b>
<b>CITY, STATE, ZIP CODE:</b>	

<b>SIGNATURE:</b>	<b>DATE:</b>
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