



New Jersey Office of the Attorney General

Division of Consumer Affairs

State Board of Social Work Examiners

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Newark, New Jersey 07101

(973) 504-6495

www.njconsumeraffairs.gov/sw

Change of Name Form

Please print clearly.

Please Note: You must submit proof of legal name change in the form of a marriage license, divorce decree, or a court order. Maiden names may not be used as middle names without a court order.

Name: _____

License number: _____

Address: _____

Street

City

State

ZIP code

Telephone number: _____ E-mail: _____

Include area code

New name: _____

- ☐ Request a new license - If you would like to have a new license/certificate to reflect the name change, please return the original license/certificate with your former name. If you do not return the original license/certificate, a fee of \$ 25.00 would be required for a duplicate license/certificate.

Signature: _____ Date: _____