



NORTH CAROLINA PSYCHOLOGY BOARD NAME CHANGE FORM

Please submit this form along with a copy of legal documentation showing the name change (see below), and the appropriate fee for certificates (see below) to the Board office at the following address:

**NC PSYCHOLOGY BOARD
895 STATE FARM ROAD, SUITE 101
BOONE, NC 28607**

1. Previous name: _____

2. New name: _____
(First) (Middle) (Last)

3. License number: _____

4. Current email address: _____

5. Current Mailing Address: _____

LEGAL DOCUMENTATION CAN BE ONE OF THE FOLLOWING:

driver's license, social security card, or marriage/divorce license

ASSOCIATED FEES FOR NAME CHANGE

Please note you are required to practice under the same name that is on your licensure certificate. Therefore, you will need to submit the following fees, which are appropriate to your licensure status) to the Board office along with your name change request

- 1) **A large wall certificate is \$25** and once paid in full takes about 6-8 weeks from order date to be received.
- 2) **An HSP certificate is \$25** and once paid in full takes about 6-8 weeks from order date to be received. *If you are HSP certified you are required to display this with your wall certificate.*