



Name Change Request

This form will be accepted through Dec. 31, 2025.

Contact DANB with any questions at 1-800-367-3262 or email docreview@danb.org.

Email form to: docreview@danb.org

Policy

To change your name on file with DANB, you may submit a Name Change Request by logging into your online DANB account (www.danb.org), or you may submit this form with required documentation.

Requests submitted online will be processed within 2-5 business days. Paper requests will be processed within 2 weeks. Once a request with appropriate documentation has been processed, or if additional information is needed, an email will be sent to your email address on file.

Name Change Documentation

Documentation being submitted (**documentation must identify the current and previous name**):

- Copy of marriage certificate
- Copy of divorce certificate
- Copy of court documents identifying the name change

Please submit copies of your documentation. Original documents will not be returned.

Request a Name Change

DANB ID or certificate number _____

Update my name to: _____
Last First M.I.

Previous Name: _____
Last First M.I.

Email (required) _____

Home Address _____

City _____ State _____ Zip _____

Phone Numbers Office _____ Cell or Home _____

I hereby officially request to change my name as noted above.

Signature X _____ Date X _____