

License Name Change Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Recipient's Title]

[Institution/Organization Name]

[Institution Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to request a change of license name for my educational license, currently held under the name [Current Name]. Due to [brief explanation of the reason for the name change, e.g., marriage, legal name change], I would like the license to be updated to reflect my new name: [New Name].

Attached to this letter are the necessary supporting documents, including [list any documents, if applicable, e.g., marriage certificate, court order].

I appreciate your attention to this matter and look forward to your prompt response.

Thank you for your assistance.

Sincerely,

[Your Name]

[Your License Number]