

North Carolina Board of Licensed Professional Counselors
PO Box 1369
Garner NC 27529

Name Change Form

Complete the following information and **mail** to NCBLPC at the address above. **Faxed copies are not acceptable.**

Please be sure to attach copies of all legal documentation, such as marriage certificate, divorce papers, or other court documents in order for the Board to process your name change request.

LPC # _____ OR SS # _____ - _____ - _____

Previous Name _____

New Name _____

Documentation Enclosed: ___ Marriage certificate ___ Divorce papers ___ Other

This form must be signed by the licensee/applicant in order to be processed.

Signature

Date

If you would like to request a license with the new name, please complete the Request for Duplicate License Form below.

Request for Duplicate License Form

Duplicate licenses may be obtained by sending this form with **\$15** payment (check, money order or credit card info) to the address above.

If your name has changed, the Board does not require you to obtain a license with your new name. However, if you wish to obtain one, mail this form along with the Name Change form and payment to the address listed above.

Name _____

Address _____

City/State/ZIP _____

I am paying by: ___ check (# _____) ___ credit card

Amount paid: \$ _____ Amount to be charged: \$ _____

CC Type: ___ VISA ___ MasterCard CC Expiration Date: _____

CC #: _____

Cardholder's Signature