



NAME CHANGE NOTIFICATION FORM

Submit form to
HR-Payroll Service Center
NE49-3182

This form is for **ACTIVE** employees only. For details and instructions, visit http://web.mit.edu/hr/empservices/name_change.html, or call (617) 253-4255 or e-mail hrpayservicecenter@mit.edu.

Please fill in all fields below, sign and return with your supporting documentation. Valid supporting documentation includes:

- A copy of your marriage license
- A copy of your new Social Security card

CURRENT INFORMATION (required)

(first name) (middle initial/name) (last name)

E-mail Address: _____

MIT ID Number: _____

INFORMATION TO BE CHANGED:

(first name) (middle initial/name) (last name)

(signature)

(date)

