



# ALABAMA LICENSURE BOARD FOR Interpreters and Transliterators

P. O. Box 240187, Montgomery, AL 36124-0187 (2777 Zelda Rd., 36106) Phone: 334-277-8881 Fax: 334-277-0188

## CHANGE OF INFORMATION

**Current information on file:** License/Permit # \_\_\_\_\_

**Ms., Mrs., Mr.**  
*Circle one* First Name \_\_\_\_\_ Last Name \_\_\_\_\_

\*\*\*\*\* *Complete just the sections below that have changed* \*\*\*\*\*

**Ms., Mrs., Mr.**  
*Circle one* First Name \_\_\_\_\_ MI or Maiden \_\_\_\_\_ Last Name \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Primary Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_ Secondary Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_ E-mail: \_\_\_\_\_

### Change in employment:

*If additional space is needed, record on a separate sheet of paper and attach to this form.*

New employer: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work Email Address: \_\_\_\_\_

### Update on Education & Credentials:

*If additional space is needed, record on a separate sheet of paper and attach to this form.*

Give update & send us a copy of your new diploma or college transcripts: \_\_\_\_\_

Give update & send proof of your new credentials: \_\_\_\_\_

\*\*\*\*\*

This is a request for a legal name change. I have attached a copy of at least one of the following pertinent documents: marriage certificate, divorce decree, court order, other: \_\_\_\_\_

I am requesting a replacement of my license reflecting my name change. I'm enclosing a check for \$25 to cover the cost of a replacement card due to a name change.

I do not need a replacement of my current license.

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### Affidavit:

I, \_\_\_\_\_ acknowledge and state that all of the information supplied in this application is true and correct to the best of my knowledge. I further acknowledge that any false or untrue statements or representation made in this document may result in the revocation or denial of any license to practice and could lead to criminal prosecution to the fullest extent of the law.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date