



Saskatchewan Association of Social Workers
2110 Lorne Street
Regina, SK S4P 2M5
Phone: (306) 545-1922
Fax: (306) 545-1895

NAME CHANGE FORM

This Name Change form should be completed by applicants who have transcripts or any required documents with a name that differs from the application name. This is to advise the Saskatchewan Association of Social Workers that I have changed my name as follows:

(Please Print)

From: _____
(Legal First Name) (Legal Last Name) (Middle Name)

To: _____
(First Name) (Last Name) (Middle Name)

You will need to provide documentation of a legal name change by providing one of the following:

1. Certificate of name change pursuant to The Name Change Act 1995 or any former legislation.
2. Marriage certificate.

Address: _____
(Street/Box Number)

(City/Town) (Postal Code)

Signature of Member

(Date)

If you require assistance, please call the SASW office at 306-545-6877.