WV BOARD OF EXAMINERS OF PSYCHOLOGISTS
Name Change Form - 2022

Mail To:

WVBEP
PO Box 3955
Charleston, WV 25339

Website: www.psychbd.wv.gov
Email: psychbd@wv.gov
Fax: (304) 957-0361
Phone: (304) 558-3040

Please provide the Board with your change of name information and any new addresses.

Please attach one copy of legal documentation such as a marriage certificate, driver's license, divorce paper decree, etc.

You can email, fax, or mail to the address above. Mail or email driver's license info, faxed copies are usually unreadable.

If you require a new license certificate, mail these materials with your check or receipt for $45 to the address above. Payments can be made on the Board's website, blue box on right credit card payments, other fees, then duplicate license fee. Scroll down to the bottom of the page to complete the payment.

Previous Name:	***Degree:**
New Name: **(First M. Last)**	
License #:	
Email Address:	

Home Address:			
City:	**State:**	**Zip:**	
Home or Cell Phone:			

***Employer:**			
***Employer's Address:**			
***City:**	***County:**	***State:**	***Zip:**
***Work Telephone #:**			
Work Fax #:			