

NAME CHANGE/CORRECTION: This form is to be used if you intend to practice law under a name other than the name you were admitted or if there is a misspelling of your name. You may type the information online, but you must then print out and either mail the completed form to the appropriate address listed below or fax it to 609-984-6859.

**Mailing Address via US Postal Service
(Certified/First Class/Priority/Express Mail):**
New Jersey Board of Bar Examiners
Attention: Name Change
P.O. Box 973
Trenton, New Jersey 08625-0973

**Overnight Deliveries
via DHL, FedEx, UPS, etc.:**
New Jersey Board of Bar Examiners
Attention: Name Change
Hughes Justice Complex, 8th Floor, North Wing
25 Market St.
Trenton, New Jersey 08625

Supreme Court of New Jersey

Certification of Name Change/Correction for Admitted Attorney (Pursuant to *Rule 1:29-2*)

[Note: Please print or type all information]

STATE OF _____

ss:

COUNTY OF _____

I, _____, an attorney duly admitted to the practice of law before all of the Courts of the State of New Jersey (Attorney Identification Number _____), do certify to the following:

1. I was admitted to the practice of law in New Jersey on _____ Mo. Day Year

2. On that date, I was admitted to the practice of law under the name of:

_____.

3. NAME CORRECTION (spelling, middle initial, etc.):

_____.

4. NAME CHANGE: By reason of a _____ dated _____
Mo. Day Year
I intend to practice law under: _____
First Name Middle Name Last Name Suffix

[N.B., If you selected "Other" from the list of options, state the basis for the name change below]

5. My business address is:

6. My business telephone number is:

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment, including possible disciplinary action.

Date: _____

Signed: _____