



CHANGE OF NAME REQUEST FORM

**The completed claim form should be submitted to:
Home Tuition Payments Section, Schools Division Financial, Department of Education and Skills,
Cornamaddy, Athlone, Co. Westmeath, N37 X 659**

Important: This Department can only maintain one name for each individual.

Current details held by this Department.

Name: _____ PPSN: _____

Date of Birth: _____

I, the undersigned, wish to inform the Department of Education & Skills that I have now changed my name to the following:

Name: _____

With effect from: _____

Reason for name change:

- Marriage: Please forward original or certified copy of legal Marriage Certificate
- Deed Poll: Please forward original or certified copy of your registered deed poll
- Other Reason: Please forward any and all supporting documentation.



Please Specify: _____

Signature: _____ Date: _____

Data Protection Privacy Statement

The Department of Education and Skills, as far as practicable and having regard to the resources available, provides for education and training for people resident in the State at a level appropriate to meet the needs and abilities of those people. The main purpose for which the Department requires the personal data provided by you is to affect your change of name and to support the accounting process the payment of this grant and the accounting and auditing of public monies. The privacy notice outlining further information in relation to this form can be found at <https://www.education.ie/en/The-Department/Data-Protection/gdpr/> . Full details of the Department's data protection policy setting out how we will use personal data as well as information regarding your rights as a data subject are available at <https://www.education.ie/en/The-Department/Data-Protection/>. Details of this policy and privacy notice are also available in hard copy from the address above upon request.