

CPA Examination Services

Information Change Request

If you are a CPA Examination candidate for any of these jurisdictions:

Alaska, Colorado, Connecticut, Delaware, Florida, Georgia, Guam, Hawaii, Indiana, Iowa, Kansas, Louisiana, Maine, Massachusetts, Michigan, Minnesota, Missouri, Montana, Nebraska, New Hampshire, New Jersey, New Mexico, New York, Ohio, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, Tennessee, Utah, Vermont, Washington, or Wisconsin

Use this form to request a change to any of the following:

- Name
- Date of Birth
- Mailing Address

NOTE: If you only need to update your email address and you applied to one of the states listed above, you can make that change at any time through the *CPA Central – Accounting Information* tool available in your user account at <https://cpacentral.nasba.org>.

Part 1 – Information Currently on Record:

1. Applicant's Name: _____
First M. I. Last

2. Date of Birth: _____
mm/dd/yyyy

3. Jurisdiction ID: _____
Available on the CPA Central sign in page

4. Jurisdiction or state to which you have applied: _____
If the jurisdiction is not listed above, you must contact your Board of accountancy directly to update your information

Part 2- New Information:

Name and Date of Birth changes require supporting documentation:

- Copy of marriage certificate OR
- Copy of court documents changing your name OR
- Copy of new Government Issued ID/Passport (for Date of Birth changes only)

Information to be changed <small>(Check all that apply)</small>	Change <u>from</u> this:	Change <u>to</u> this:
<input type="checkbox"/> Name		
<input type="checkbox"/> Date of Birth		
<input type="checkbox"/> Address (street 1)		
(street 2)		
(City, State, Zip)		

_____ Date

_____ Applicant's Signature (required)

RETURN THIS FORM TO:

Fax: 615-312-3792
 cpaexam@nasba.org

CPAES
 PO Box 198469
 Nashville, TN 37219

For Office Use Only

Updated by: _____ Date: _____

ATT update required? Yes No ATTUPDATE sent? Yes No