



INDIVIDUAL NAME CHANGE FORM
NORTH DAKOTA BOARD OF COSMETOLOGY
SFN 60541 (04-2017)

ND State Board of Cosmetology
4719 Shelburne St.; Suite 1
Bismarck, ND 58503

For an individual name change, please complete the following form and mail to the address above.

Prior Name		
New Name		
Address		
City	State	ZIP Code
Birth Date	Telephone Number	
License Number	License Type	
I would like a new license <input type="checkbox"/> No <input type="checkbox"/> Yes (If yes, please enclose \$10.00 per license.)		

Questions?

Email: info@ndcosmetology.com

Call: (701) 224-9800

Fax: (701) 222-8756

www.ndcosmetology.com