



JUDICIAL BRANCH CERTIFICATION COMMISSION

Office of Court Administration

Update of Name and Contact Information Form

Please Type or Print Legibly

Please check the appropriate box below:

- | | |
|--|---|
| <input type="checkbox"/> Court Reporters Certification | <input type="checkbox"/> Licensed Court Interpreters |
| <input type="checkbox"/> Guardianship Certification | <input type="checkbox"/> Process Server Certification |

Submit Form to this Address:

Judicial Branch Certification Commission, P O Box 12066, Austin, TX 78711-2066

(All fields must be completed. Notifications to applicants will be sent via email.)

Applicant Information	
Applicant Name: <i>(Individual or Court Reporting Firm)</i>	
CRCB File Number: <i>(for uncertified CRCB individuals)</i>	
Certification, or License Number #:	
Name you would like on your card or license: <i>(Last, First, Middle)</i>	

Is this a name change: <i>Supporting documentation required for name changes. (e.g. copy of marriage license, driver's license, or court order.)</i>	Reason for name change:
<input type="checkbox"/> Yes (or) <input type="checkbox"/> No	

Mailing Address:					
Phone #:		Fax #:		Email Address:	

Business Contact Information					
<i>(This information will be publicly available. If left blank, mailing address above will be used for business contact purposes.)</i>					
Employer: <i>(Name, if self-employed)</i>					
Mailing Address:					
Phone #:		Fax #:		Email Address:	

Signature of Applicant

Date