



Idaho State Board of Pharmacy

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Individual/Person Legal Name Change Request

Idaho Rule:

Individual Information Changes. Changes in employment or changes to information provided on or with the initial or renewal application must be reported to the Board within ten (10) days of the change. The Board will accept an email to info@bop.idaho.gov for the ten (10) day notification.

1. **Complete the fields** - in the section indicated below named ‘**Legal Name Change Request**’. If there are any incomplete fields the request will not be processed.
2. **Save the form in a PDF format** in a place where it can easily be retrieved to attach to an email
3. Email a copy of the **completed form & required documents** indicated below to info@bop.idaho.gov

Subject line of the email should include the following;

- Legal Name Change
- Name of the Licensee/Registrant
- Idaho License/Registration Number

Required Documents – Attach to the email;

1. Legal document allowing the name change;
 - Divorce decree
 - Marriage certificate
 - Court document granting name change
2. Current government issued photo ID with new legal name indicated
 - Driver’s License
 - Passport

Legal Name Change Request Information

Date of name change: _____

Idaho Board of Pharmacy License/Registration Number: _____

Name on License/Registration include first, middle & last name: _____

New Legal Name include first middle & last name: _____

Signature: _____ Date: _____