

Higher Education Coordinating Commission

Office of Academic Policy and Authorization Private Career Schools Licensing Unit 3225 25th Street SE Salem, Oregon 97302 www.oregon.gov/HigherEd

Teacher www School, Address or Name Change Form

Registered teachers, please notify the Higher Education Coordinating Commission (HECC) in writing within 30 days of any change of teaching locations, mailing or email address or legal name change. This form is to assist you in notifying the HECC Private Career School's Licensing Unit of your intention to relocate or change your legal name or address.

Teaching location change Mailing/email address change Legal name c	egal name change
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Teacher's Name:_____

Effective Date: _____

Previous information to be changed (enter all that apply)	
Former School Name	
Former Mailing Address	
Former Email:	
Former Legal Name	

	New Information (enter all that apply)
School now teaching at: Current School Name	
Current Mailing Address	
Current Email:	
Current Legal Name: (You will need to Include proof of legal name change)	

If you are teaching at a new school, the school Director must sign below $\mathbf{\nabla}$:

Signature of Teacher

Date

Signature of New School Director

Date

Once you have completed the form, included your name change documentation, submit to:

HIGHER EDUCATION COORDINATING COMMISSION

Private career schools 3225 25th St., SE

Salem, Oregon 97302