

**Previous Name Information** 

Last Name: \_

## **Completed Forms can be Sent To:**

CENTRAL SERVICES BUILDING Security Administration Room 10 Fax: 414-47(5-8015)

(required)

Highlighted areas must be filled in

## MPS Login Name Change Request Form (For Legal Name Changes Only)

All employees who have a legal name change **MUST** contact Human Resources **FIRST** to complete a **Name Change Form**. *No login changes will be made until Human Resources has been contacted!* 

First Name:

Employee ID#:	Site #:	Daytime Phone #:	(required)
Current Legal Name:			
Last Name:	First Name:	MI	(Required)
Current MPS Logins	Login Used (Please Print/Type)	(For Office Use Only) <b>New Login Name</b>	
Internet/Portal/eMail			
eSIS			
place in <b>Mid</b>	e eSIS Gradebook? Yes C eSIS Gradebook, Your eSIS login will not be ch eSIS Gradebook, Your eSIS user login will red estions Currently Accessed:		
	Please Print/Type the Login you use	(For office use only)  New Login Name	(For Office Use only) Initials/Date Processed
☐ CASH			
☐ IFAS			
☐ IPAY			
SSIMS			
OTHER- LIST Below			
Applicant Signature  When	the changes have been made, you will receive		