

Preferred Name Change – Request Form

Please note: This change will only impact the employee record and email address.

EMPLOYEE IDENTIFI	CATION – CURRENT IN	IFORMATION (Please Prin
Last Name	First Name	Middle Name
Department	MyMohawk ID	Status (FT or PT)
PREFERRED NAME CH	HANGE INFORMATION	(Please Print)
Preferred Last Name	Preferred First Name	Preferred Middle Name
Effective Date of Chang	- ge (DD/MM/YYYY)	
Employee Signature	Date (DD/MM/YYYY)	
INTERNAL HR USE O	NLY	
Banner IT (MyMohawk, E	mail)	