



The College of Naturopaths of Ontario

## Applying for Change of Name (Entry-to-Practise)

To request a name change, please complete the name change request form and submit it to the College with the required supporting documents noted below.

### Documentation to Submit with Your Application

Legal documentation confirming the new name is needed before your request can be processed. Please provide a copy of one (1) of the following documents with your application:

- Change of name certificate issued by the government of Ontario.
- Marriage certificate (include a valid copy of a government-issued ID displaying your new name).
- Certificate of divorce (include a valid copy of a government-issued ID displaying your new name\*).
- Sworn affidavit for validation of identity signed by a Commissioner of Oaths.

\*The following Government-issued identification documents are accepted by the College: Provincial driver's license, Provincial identification card, Canadian Citizenship card, Canadian Permanent Resident card, Canadian passport, and Indian Status Card (issued on or after December 15, 2009).

### Submitting Your Documentation

You may submit the documentation by:

- Email: [applications@collegeofnaturopaths.on.ca](mailto:applications@collegeofnaturopaths.on.ca)
- Mail: College of Naturopaths of Ontario  
150 John Street, 10<sup>th</sup> Floor  
Toronto ON M5V 3E3
- Fax: 416-583-6011

Should you require any further information regarding this process, please contact the Applications department at [applications@collegeofnaturopaths.on.ca](mailto:applications@collegeofnaturopaths.on.ca) or 416-583-5997.



The College of Naturopaths of Ontario

## Name Change Request Form

### I: Applicant Information

Current Name on the Pre-Registration form:

*First Name*

*Middle Name*

*Last Name*

To be Changed to:

*First Name*

*Middle Name*

*Last Name*

### ii) Supporting Documents

Enclosed is one of the following documents to confirm my change of name:

- Copy of change of name certificate
- Copy of marriage certificate + government-issued identification displaying new name
- Copy of divorce certificate + government-issued identification displaying new name
- Sworn affidavit for validation of identity signed by legal counsel

### iii: Declaration

I acknowledge and agree that:

- This name change is not for any improper or illegal purpose
- Upon registration with the College to practise naturopathy in Ontario, the name in the register shall be the full name indicated on the document used to support my initial registration with the College
- Upon registration with the College, I will not be permitted to use a name other than the name as entered in the register to practise the profession or provide professional services.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Signature (Month/Day/Year)