



New Jersey Department of Education
Office of Certification and Induction

Social Security Number Record Change Request Form

In order for your social security number change request to be processed, this form must be completed in its entirety and emailed, with supporting documents, to CertApplication@doe.nj.gov. Incomplete forms will not be accepted. Concerned with the proliferation of identity theft, the New Jersey Department of Education (NJDOE) now requires submission of multiple forms of identification which must be scanned and emailed along with this form. Additionally, please [apply online](#) for the social security number change request. There is no fee.

Submission of Identification Information

The candidate is required to submit *no less than two* types of identification in addition to a photocopy of an individual’s social security card, which is mandatory. Clear and legible photocopies/scans of these cards and documents should be emailed to CertApplication@doe.nj.gov.

Required Identification

Social Security Card: A photocopy of the candidate’s social security card *must* be submitted as one of three types of identification for the purpose of changing an individual’s social security number. If your card has been lost, a replacement will need to be issued. To request a replacement card, please contact the Social Security Administration at 1-800-772-1213 or visit the [Social Security FAQ](#) webpage. Change requests that do not include a photocopy/scan of the social security card will be rejected.

In addition to a copy of your social security card, select *two* of the following items for submission:

- 1. Certificate of Birth (Raised Seal Copy)
- 2. New Jersey or Out-of-State Auto Operator License
- 3. United States Passport (current or expired within 3 years)
- 4. Adoption Papers
- 5. Certificate of Citizenship
- 6. Certificate of Naturalization
- 7. United States Military Photo ID Card
- 8. New Jersey Non-Driver Digital ID Card

Candidate Contact Information

Last Name: First Name: Middle Name or Initial:

Last Four Digits of Social Security Number: ***-**- Tracking Number:

Date of Birth (mm/dd/yyyy): Phone Number:

Street Address:

City: State: Zip Code:

Email Address: