



ASE Record Update Authorization

I authorize ASE to update the following item(s) in my ASE record: (Check all that apply)

- Name change** – for example, Jane Smith to Jane Jones – attach a copy of your marriage license, divorce decree, or court ordered name change documentation
- Name correction** – for example, Bill Brown to William Browne Jr. – attach a copy of your current driver’s license, military ID card, or other government-issued form that shows your full name and date of birth
- Social security number** – attach a copy of your social security card, payroll stub, military ID card, or other government-issued form that shows your full name and social security number
- Date of birth** – attach a copy of your current driver’s license, birth certificate, military ID card, or other government-issued form that shows your full name and date of birth

Print your full name: _____

If you checked **Name change** or **correction**, print the incorrect name ASE has on file:

Mailing address: _____

City, State, and Zip Code: _____

Daytime phone number (with area code): _____

Signature: _____ Date: _____

Complete this form, and mail it with copies of documentation to:

Regular mailing address

ASE
PO Box 4007
Iowa City, IA 52243

Overnight address (FedEx, UPS, etc. only):

ASE
Tyler Building (86)
301 ACT Drive
Iowa City, IA 52245
Phone: (319) 337-1433

Or you may fax the information to: **(319) 341-2297**

Please allow three business days for changes to be made to your records. We will contact you if we need additional documentation.

Questions? Contact the ASE Help Desk at (319) 337-1433 or asehelp@act.org