

TEXAS COMMISSION ON LAW ENFORCEMENT
6330 E. Highway 290 , STE 200
Austin, Texas 78723-1035
Phone: (512) 936-7700
<http://www.tcole.texas.gov>

Personal Information Change
Name/Address/Driver License/DOB
Commission Rule § 211.27
Please Print Legibly

Please email to name.change@tcole.texas.gov
 Or mail to the address above or fax 512-936-7766.

1. Last Name (Name on File)	2. First Name (Name on File)	3. M.I.	4. Suffix (Jr., etc.)
5. TCOLE PID			

New Name / Address / Driver License / DOB / Personal Information:

Attach copy of driver's license, state issued ID or certified copy of court order.

6. Last Name		7. First Name		8. M.I.	9. Suffix
10. Date of Birth	11. Driver License No.	12. Driver License state	13. Driver License Gender		
14. Address					
15. City		16. State		17. Zip Code	
18. Phone Number			19. Email Address		
20. Height in Feet' Inches"	21. Weight in Lbs.	22. Hair Color		23. Eye Color	

I certify that the above information is true and correct, and may be used to update my TCOLE personal record.

 Signature of Licensee

 Date