

WHEATLAND SCHOOL DISTRICT

CHANGE OF NAME/ADDRESS FORM

Employee ID # _____

New Name: _____

New Address: _____

City and Zip: _____ New Phone #s: _____

Former Name: _____

Former Address: _____

City and Zip: _____ New Phone #s: _____

EMPLOYEE SIGNATURE: _____ Date: _____

NOTE: Address changes are made by the employee for CVT and STRS through their websites

COPY OF OFFICIAL DOCUMENT

(ie: marriage certificate, divorce document, adoption paper, social security card)

UPDATE WSD COMPUTER SYSTEM

UPDATE OFFER OF EMPLOYMENT

UPDATE PERSONNEL CARD

UPDATE PERSONNEL FILE

UPDATE SUB SYSTEM

UPDATE PERS SYSTEM

RECEIVED BY: _____ DATE RECEIVED: _____

**THIS FORM MUST BE HAND DELIVERED (BY THE EMPLOYEE) TO PAYROLL
OR HUMAN RESOURCES AT THE DISTRICT OFFICE**