

HOPEWELL VALLEY REGIONAL SCHOOL DISTRICT

Employee Change of Address/Telephone/Name

Please Print

Name _____
Last First Initial

Name Change to: _____

Address Change: _____
Street

_____ City State Zip

Telephone Number Change: _____

Effective Date of Change: _____

Signature Date

NOTE: When a name change occurs, you are required to complete a new I9 (Employment Eligibility Verification Form.) Please provide two forms of identification with name change for our files. Examples of forms of identification (driver's license, social security card, passport, birth certificate.)

Return this form to Human Resources.

HR Office Use

Changes will be made in the following:

- Systems 3000
- HR Database
- OnCourse
- Absence Management