



**WEAVER UNION SCHOOL DISTRICT
HUMAN RESOURCES DEPARTMENT**

1240 D Street
Merced, Ca 95341
(209) 723-7606  HROffice@weaverusd.org

ADDRESS/PHONE/NAME CHANGE FORM

*The Human Resources Office requires district employees to inform our office in writing in the event of an address, phone or name change. For your convenience, please use this form and return to the Human Resources Office as soon as possible for accurate record keeping purposes. **As a reminder, if you are currently the holder of a Section 125 Flexible Benefit Plan or an alternate retirement annuity plan, you are responsible to notify the company directly of any changes to your personal information.***

Name:		ID#:		Date:	
Title:		Site:			
ADDRESS CHANGE					
FROM			TO		
Street:		Street:			
City:		City:			
State:		State:			
Zip:		Zip:			
PHONE CHANGE					
FROM			TO		
Home:		Home:			
Cell:		Cell:			
NAME CHANGE					
FROM			TO		
First:		First:			
M.		M.			
Last:		Last:			
<p><i>The following items <u>must</u> be attached with this form before the name change can become effective.</i></p> <p>✓ A copy of the new <u>Social Security card</u> and valid <u>State Issued ID</u> with the new name.</p> <p>✓ Updated <u>Federal Withholding Form W-4</u>, <u>State Withholding Form DE-4</u> and <u>Employment Eligibility Verification Form I-9</u> with the new name.</p>					

Employee's Signature: _____ Date: _____

HUMAN RESOURCE USE ONLY				
DEPARTMENT	Date Received	Date Updated		
Human Resources Office				
Business Office				
IT Email Notification (Name changes only)				
Supervisor Notification (Name changes only)				