

La Grange Independent School District
Name / Address / Phone Number Change Form

Employee ID Number _____ (number located on your employee badge)

Name: _____

New Name: _____

NEW Street Address: _____
(Please Print)

City, State, Zip: _____

NEW Home Phone Number: _____
(Area Code)

Employee Signature

Date

Turn in form to Payroll Department:

560 N. Monroe
La Grange, TX. 78945

or Fax to:

(979) 968-8155 Attn: Payroll

or send through inner-office mail.

If you have a name change please bring a copy of your new social security card and driver's license to the Administrative Office.