



## Name/Address Change Form Human Resources/Affirmative Action

\*Please use ballpoint pen and print clearly

\*For name change ONLY: Please include a copy of social security card with your new name. You also must complete new tax forms. These forms are available in Human Resources (HAB 203) as well as Payroll (HAB 301). You may also download them at:  
[www.newpaltz.edu/payroll/forms.html](http://www.newpaltz.edu/payroll/forms.html)

Name: \_\_\_\_\_

Former Name (*if name change*): \_\_\_\_\_

New Legal/Physical Address: \_\_\_\_\_  
 \_\_\_\_\_

New Home/Mailing Address: \_\_\_\_\_  
 (*if different*)  
 \_\_\_\_\_

Job Title: \_\_\_\_\_

Last 4 digits of Soc Security # \_\_\_\_\_

Phone Number:      home- \_\_\_\_\_

                                 campus- \_\_\_\_\_

\_\_\_\_\_ Date

\_\_\_\_\_ Signature

	Payroll	Benefits	Data Management
Date:			
Initial:			