

CHANGE OF ADDRESS OR NAME CHANGE FORM

STUDENT ASSISTANT AND/OR COLLEGE WORK STUDY

Payroll • Haggerty 301 • New Paltz, NY 12561-2443 (845) 257-3145 • fax: (845) 257-3103 • www.newpaltz.edu/payroll

Please use ball point pen and print clearly.

For name change ONLY please include a copy of social security card and tax forms with new name.

Name:		_ New Permanent Address:
Former Name (if name change):		
Last 4 digits of SS#:		
Home Phone#:		
Cell Phone#:		Mailing Address (if different from permanent
		address): 🗌 Add 🗌 Change 🗌 Delete
Signature	Date	
oignature	Date	