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## Employee Information Change Form

Employee Name: (First) \_\_\_\_\_ (Last) \_\_\_\_\_

Employee ID#: \_\_\_\_\_ Employee SSN#: \_\_\_\_\_

Effective Date of Change: \_\_\_\_\_

Check all that Apply

**Name Change:**

(Note: Legal name changes require a copy of a government issued identification card or a record of a legal name change.)

Document Provided: New Social Security Card with Name Change  Marriage License/Certificate  Divorce Decree

New Legal Name: (First) \_\_\_\_\_ (Last) \_\_\_\_\_

**Address Change**

(Note: Address changes require I9 form to be updated.)

Old Address: \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip Code) \_\_\_\_\_

New Address: \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip Code) \_\_\_\_\_

**Contact Information Change**

New Home #: \_\_\_\_\_ New Cell #: \_\_\_\_\_

New Personal Email: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Human Resource Authorization: \_\_\_\_\_ Date: \_\_\_\_\_

**If your information change was due to a change in marital status or other qualifying event, please contact HR to find out how your life status change affects your employee benefits. If you plan on changing your filing status, you will also need to fill out an updated W-4.**