

**LIBERTY CENTER LOCAL BOARD OF EDUCATION  
AUTHORIZATION FOR NAME AND/OR ADDRESS CHANGE  
NOTIFICATION**

I hereby authorize LIBERTY CENTER LOCAL BOARD OF EDUCATION (EMPLOYER) to make the following changes:

**EMPLOYEE NAME:**

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**PREVIOUS ADDRESS:**

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**EMPLOYEE NAME CHANGE:**

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**ADDRESS CHANGE:**

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**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_