Darien Public Schools 35 Leroy Avenue Darien, CT 06820

## **EMPLOYEE RECORD CHANGE FORM**

(RETURN THIS FORM TO KAREN SMITH IN PAYROLL)

## READ CAREFULLY. USE THIS FORM TO CHANGE YOUR: NAME - ADDRESS- TELEPHONE NUMBER - MARITAL STATUS

EMPLOYEE NAME:	
SCHOOL/LOCATION:	
EXTENSION:	
EFFECTIVE DATE OF CHANGE(S):	
COMPLETE ONLY THOSE AREAS TH	AT YOU WISH TO CHANGE
CHANGE NAME FROM:	
CHANGE NAME TO:	
REASON FOR NAME CHANGE:	
**COPY OF NEW SOCIAL SECURITY CARD WITH NE	W NAME MUST BE ATTACHED**
NEW ADDRESS:	
CITY STATE & ZIP	
NEW PHONE NUMBER:	CELL
CURRENT MARITAL STATUS: SINGLE MARRIED DIVORCED	
SIGNATURE	DATE

<sup>\*\*</sup>IF A CHANGE IN MARITAL STATUS YOU MIGHT WANT TO REVIEW YOUR CURRENT BENEFICIARIES AND TAX WITHHOLDINGS. THESE FORMS CAN BE FOUND ON OUR DISTRICT WEB SITE UNDER HUMAN RESOURCES/BENEFITS OR HUMAN RESOURCES/PAYROLL (FOR TAX FORMS) \*\*