

SWBOCES
Human Resources- Personal Data Change Form

Directions:

Use this form to change the personal information on file with the Department of Human Resources. You may only change your own information and it may be changed at any time.

Information to be changed: (Check All That Apply)

- | | |
|--|--|
| <input type="checkbox"/> Name* | <input type="checkbox"/> Phone Number*** |
| <input type="checkbox"/> Mailing Address | <input type="checkbox"/> Emergency Contact Information |
| <input type="checkbox"/> Legal Address** | <input type="checkbox"/> Email Address**** |

New information:

Name* _____
Address** _____

Phone*** _____
with Area Code _____
Email Address**** _____

Old Address Information: (Include only if changing your mailing and/or legal addresses)

Change of Emergency Contact Information (only):

Name _____
Phone _____
with Area Code _____
Relationship Spouse Relative Friend

* This form must be accompanied by legal documentation of your name change. (i.e. Copy of your Marriage Certificate).

** Your legal address cannot be a Post Office Box. If you change your address to/from New York City or Yonkers, you need to contact the SWBOCES Payroll Office (914) 937-3820 Ext. 525 to complete an updated W-2 (federal) and IT-2104 (state) tax withholding forms.

*** This phone number will be used for the SWBOCES Emergency Closing Notification System.

Print Employee's Complete, Legal Name

Employee's Signature

Date

Send completed form in the Pony or mail to:

SWBOCES- Human Resources Department
17 Berkley Drive
Rye Brook, NY 10573