PARIS JUNIOR COLLEGE EMPLOYEE CHANGE OF ADDRESS/NAME FORM

Employee ID:					
Employee Social Securi	ity Number: XXX-XX				
Employee Name:					
New Name:					
Your P	JC email will be update	d with your new name.			
(For change of name yo	ou will need to bring yo	ur official driver's license an	d social security c	ard.)	
New Address:					
		(Street)			
	(City)	(State	<u> </u>	(Zip)	
Please complete inforn	nation below to update	our records:			
Personal Email:					
Home Phone:	Cell Phone:				
Emergency Contact N	ame:				
Emergency Phone:					
	Cell Number	Home Number	Work Numb	per	
•	ame Changes MUST be s es, please complete a n	ent to Human Resources. If ew W-4 form.	f you wish to chan	ge your marital	
Employee Signature		Hur	Human Resources Signature		
Date			Date		
		Date	entered in payroll	system	

THE FOLLOWING ENTITIES MUST BE CONTACTED BY THE EMPLOYEE WITH YOUR CHANGES.

ERS - www.ers.texas.gov - 1-800-275-4377

TRS - www.trs.texas.gov - 1-800-223-8778

ORP – YOUR FINANICAL ADVISOR