

NAME CHANGE

EMPLOYEE INSTRUCTIONS:

1. Use this form to change your name.
2. In order to change your name with Richmond Public Schools, you must submit this form with either a copy of your new social security card or a copy of the two page receipt from Social Security Administration.
3. Return this signed form to the Benefits and Compensation Department by email at benefits@rvaschools.net. Incomplete forms will be returned.

Employee ID Number	Last Four of SSN	Effective Date of Change
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Current Employee Name	Last
	First
	Middle

New Employee Name	Last
	First
	Middle

Employee Signature	Date
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For Benefits and Compensation Department Use Only	Input by	Date
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RETURN TO THE BENEFITS AND COMPENSATION DEPARTMENT AT [BENEFITS@RVASCHOOLS.NET](mailto:benefits@rvaschools.net)