



# Pittsburg Community Schools

Unified School District 250

## Personal Information Change Form

(All Changes MUST be delivered by employee to the HR Department  
at the Bevan Education Center)

**ORIGINALS ONLY ACCEPTED**

I am submitting this form to change my (check all that apply and complete form  
with new information):

\_\_\_\_ Address      \_\_\_\_ Name      \_\_\_\_ Phone      \_\_\_\_ Marital Status

\_\_\_\_\_  
Employee ID or Social Security Number

(\_\_\_\_\_)\_\_\_\_\_  
Home Phone Number

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
M.I.

\_\_\_\_\_  
Home Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR NAME CHANGE:** ATTACH A COPY OF YOUR NEW SOCIAL SECURITY CARD AND  
DRIVER'S LICENSE.

**FOR MARITAL STATUS CHANGE:** ATTACH A COPY OF YOUR NEW SOCIAL SECURITY  
CARD, DRIVER'S LICENSE AND A COPY OF YOUR MARRIAGE CERTIFICATE OR DIVORCE  
DECREE.