

Name/Address Change Form

Whitley County Board of Education

Department of Human Resources

Previous Name _____

*New Name _____

New Street Address _____

City _____ State _____ Zip _____

Phone _____

*Name Change Requests Must Be

Accompanied by New Social Security Card and W-4

-This form will update your address with Human Resources, Payroll, Insurance Offices and Humana.

-Life events such as marriage, death or divorce may require updates to your beneficiaries for life insurance and retirement

Please return this form (along with the new Social Security

Card and W-4 forms if name change) to:

Human Resources WCBOE

Employee Signature _____

Date _____