



INDEPENDENT SCHOOL DISTRICT

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CHANGE OF NAME NOTICE

Date: _____

Former Name of Staff Member: _____

School/Building Assignment: _____

NAME REGISTERED WITH SOCIAL SECURITY: _____

ADDRESS: _____

_____/_____

Last four of SS# / Employee ID

Home Number

Gender Status F M

Marital Status _____

M S

Other Number



INSTRUCTIONS FOR MAKING A NAME CHANGE

To change your official name with Cypress-Fairbanks Independent School District, you must:

- print all pages of this document;
- complete the change of name notice; and
- submit the completed form to the Payroll Department.

It is imperative that ALL ITEMS BE RETURNED TO THE PAYROLL DEPARTMENT. Please include a copy of or present the social security card, court documents, government issue ID/driver's license with the new name.

If you are updating your beneficiary on record with Teacher Retirement System, please submit the TRS 15 Designation of Beneficiary form with TRS .

If you are a teacher or paraprofessional, you have the option of changing your name on your Texas Teaching Certificate. If you would like information on how to change the name on your certificate, contact the State Board of Educator Certification (SBEC) at 888-863-5880 or www.sbec.state.tx.us.

If you have any questions regarding the change of Name Notice forms, please feel free to call the Payroll Department at 281-897-4010.

Thank you.

EMPLOYEE BENEFITS

TO: CFISD EMPLOYEES
FROM: INSURANCE DEPARTMENT
SUBJECT: NAME CHANGE FOR BENEFITS

You only have 30 days from the date of your marriage or other “Qualifying Event” to make changes to your benefit plans.

You can add any newly acquired dependents, terminate your own coverage, or that of your dependents by submitting the required forms and documentation to the Insurance Department at ISC-North. The forms and instructions are on the Insurance Department’s web page on the “Mid-Year Plan Changes” link or on the “Your Benefit Station” link.

To change the beneficiary on your \$30,000 Basic Life and Accident Death & Dismemberment policy and any Optional life insurance, you will need to log into the **benefitsCONNECT** online enrollment system and follow the instructions for naming or changing your beneficiary.

If you have any questions about your options or the forms required, please call the Insurance Department at: Last Name A-K: (281) 897-4138
Last Name L-Z: (281) 897-4747