



EMPLOYEE INFORMATION CHANGE FORM

THIS SECTION MUST BE COMPLETED FOR NAME CHANGES

Former First Name: _____ Former Last Name: _____

New First Name: _____ New Last Name: _____
(As it appears on Social Security Card)

***Employees must present their new Social Security card and picture ID *in person* to the Human Resources Department.**

THIS SECTION MUST BE COMPLETED FOR ADDRESS CHANGES

Mailing Address: _____
City, State, Zip

COMPLETE THIS SECTION IF CHANGING:

Employee Phone Number: _____

Emergency Contact Name: _____

Relationship to Employee: _____

Emergency Contact Phone Number: _____

***Please note, this form does not update TRS Retirement or SBEC/TEA certification information. Complete the steps below to ensure all systems are updated:**

TRS Retirement

- TRS requires the employee to submit a TRS Change form to them directly or log into the [myTRS](#) member portal to update information.

SBEC Certification

- Employees who hold certification with the State Board for Educator Certification (certified teachers/paraprofessionals) will need to access their [TEA Login](#) account to submit their name change.

Printed Name: _____

Campus/Dept: _____

Employee Signature: _____

Date: _____