

**The Somerset Hills School District**

**Name/Address/Telephone Change Form**

Please check building assignment:

- High School       Middle School       Bedwell       Olcott

Today's Date: \_\_\_\_\_

Current Name: \_\_\_\_\_

\* **New Name:** \_\_\_\_\_

Current Address:

**New Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Current Primary Phone #: \_\_\_\_\_

**New Primary Phone #:** \_\_\_\_\_

Current Secondary Phone #: \_\_\_\_\_

**New Secondary Phone #:** \_\_\_\_\_

**\* For name change, you must present new social security card to the Payroll Department. Also, if changes need to be made to your life insurance beneficiary and/or health benefits, you must contact the Payroll Department. At that time, you will be given the necessary forms for completion.**

Submit this completed form to the Human Resource Office in the Olcott Building.  
A copy will be returned to you confirming that the requested changes have been made.

Distribution:
_____ Human Resources
_____ Technology
_____ Payroll
_____ Accounts Payable
_____ Building Main Office
_____ Staff Member
_____ Aetna
_____ Delta