

Aberdeen School District

Change of Address Form

Please print the following information:

Your name: _____

New mailing address: _____

City, State, & Zip Code: _____

New physical address, if different from mailing: _____

City, State, & Zip Code: _____

Effective date for the new mailing address: _____

List phone numbers you want on file:

Phone number: () _____ This number is for my: home ____ cell ____.
 area code

Phone number: () _____ This number is for my: home ____ cell ____.
 area code

Building/Location: _____

Forward this form to the Human Resources office in order to update the appropriate files and records.

Please forward completed form to:

Aberdeen School District
Attn: Human Resources
216 North G Street
Aberdeen WA 98520

For District use only:

Please route to: Business Office _____ Payroll _____ HR _____ then Employee File

Update, if applicable:

☐ Medical ☐ Dental ☐ Dept of Retirement