



Central Unified School District
 4605 N. Polk Avenue
 Fresno, CA 93722

- Certificated Employee
- Classified Employee
- MSC Employee
- Substitute - Certificated
- Substitute - Classified

NAME / ADDRESS CHANGE - REQUEST FORM

District Email Users: Changing your name will automatically generate the issuance of a *new* district email address under your *new* name. The email address associated with your *former* name will be deactivated after a period of 45-days.

NAME CHANGE:

NEW: _____
Last First Middle

FORMER: _____
Last First Middle

NOTE: A copy of your driver's license and social security card reflecting the new name is required to process this request and take effect.

ADDRESS CHANGE

Employee Name: _____ Phone:(____) _____
Last First Middle

New: _____ New Phone:(____) _____
Street Address City State Zip Site/Dept: _____

Former: _____ Position: _____
Street Address City State Zip

Acknowledgement: I authorize the changes above and understand that my request will not be processed if it is in any way incomplete. I will also make any necessary changes to my Emergency Card.

LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	SIGNATURE	DATE

PLEASE RETURN THIS FORM TO HUMAN RESOURCES

Revised: 3.27.2007cb; 4.11.2014 ec