

Employee Change of Address/Name Notification



**STANWOOD-CAMANO
SCHOOL DISTRICT**

Please complete the change of address, phone number and/or name information below. Thank you.

☐ Address Change  ☐ If you have students in the district please provide proof of residency (Utility bill, rental agreement or closing papers)

☐ Telephone/Cell Number Change

☐ Name Change  ☐ Social Security Card **Required**
(Direct employee to Payroll for processing)

Effective Date of Change(s): _____ ☐ Certificated ☐ Classified ☐ Substitute

Please provide all information requested below so we can verify complete database information.

Name: _____  Location: _____

Prior Name (if changed): _____

Home Address: _____ City/State/Zip: _____

Mailing Address: _____ City/State/Zip: _____

Home Phone: _____ Cell Phone: _____

Which phone should be listed as primary (will receive auto-dial/emergency calls)? ☐ Home ☐ Cell

School E-mail: _____ Personal E-mail: _____

NOTE: ALL Employees will have school e-mail listed as e-mail of record.

Please list ALL household members (employee or student) within Stanwood-Camano School District. If additional space is needed, please use reverse side.

Household Member Name	Employee?	Student?	Apply change to this person?	School/ Department	Parent/Guardian Name
	☐ Yes/ ☐ No	☐ Yes/ ☐ No	☐ Yes/ ☐ No		
	☐ Yes/ ☐ No	☐ Yes/ ☐ No	☐ Yes/ ☐ No		
	☐ Yes/ ☐ No	☐ Yes/ ☐ No	☐ Yes/ ☐ No		
	☐ Yes/ ☐ No	☐ Yes/ ☐ No	☐ Yes/ ☐ No		
	☐ Yes/ ☐ No	☐ Yes/ ☐ No	☐ Yes/ ☐ No		
	☐ Yes/ ☐ No	☐ Yes/ ☐ No	☐ Yes/ ☐ No		

Substitute Online (current employees only):

☐ Please do NOT list cell phone number

☐ Please do NOT list home phone number

Signature of person completing form: _____ Date: _____

For Internal Use Only (Completed form to be distributed to each department as follows):

Change in WesPAC: _____
Date

Copy to: ☐ Payroll ☐ Personnel File

Other: _____

