

**Personal Information Changes**

Employee ID # \_\_\_\_\_

Name \_\_\_\_\_

Previous Address \_\_\_\_\_

Previous Phone # \_\_\_\_\_

Other Information \_\_\_\_\_

New Name \_\_\_\_\_  
(Attach legal document which authorizes name change)

New Address \_\_\_\_\_

New Phone # \_\_\_\_\_

Location/Position \_\_\_\_\_

Other Information \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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For HR USE Only

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- Name Change – Copy to \_\_\_Payroll, \_\_\_Subfinder, \_\_\_Infinite Campus,  
\_\_\_Lisa Ando, Technology
- Name, address, phone changes –  
\_\_\_Copy to City Hall (Michelle Morris)  
\_\_\_City of Brockton Retirement Board
- File form in Personnel file
- Administrative Assistant's initials \_\_\_\_\_ Date:\_\_\_\_\_