

Swansea Public Schools

Employee Change of Address, Telephone or Name Form

Date Submitted: _____

Employee (*please print*): _____

****New Name:** (*please print*): _____

New Telephone Number: _____

New Physical Address:

New Mailing Address:

Same as physical address

****If you are changing your name, please come to the Business Office: new payroll tax forms need to be filed. Please bring proper documentation i.e. marriage certificate, court papers, etc. to validate change.**

Effective Date of Change: _____

Employee Signature: _____

Please return to:
Chelsea Souza
Payroll Department
Admin Building

No changes will take effect without proper documentation & signature.