

HOOVER CITY BOARD OF EDUCATION

Name and/or Address Change

Name Currently Shown on Payroll: _____

Name Change to (must attach
Social Security card) _____

New Address: _____

New Phone #: _____

Social Security #: _____ XXX-XX- _____

School or Location: _____

Job Position or Title: _____

I give permission to have my name and/or address changed on all of my employee records and files.

Employee's signature

Date

Please notify your school payroll secretary of any changes.

Payroll use only:
Human Resource Dept.
Technology Dept.
Payroll Vendors for Deductions