

Lynden School District # 504

CHANGE IN PERSONAL INFORMATION FORM

(This form ONLY changes information for Payroll, Personnel, Retirement, SEBB, Accounts Payable, Building and Union.)

Name _____ Building _____
 Last Name (before change) First MI

 Change in Marital Status from ___ Single ___ Married **to** ___ Single ___ Married

New Legal Name Changed to: _____
(Original Social Security Card must be brought to payroll for copy to be made)

New Home Street Address: _____ **City/Zip:** _____

New Mailing Address (if different than home address):

Street or PO Box _____ City/Zip: _____

Previous Address: _____

Home Phone Number: _____ Cell Phone Number: _____

Personal Email Address: _____

Signature _____ Date _____

Changes received by the 15th of the month will be processed in the current month. Changes received after the 15th will be processed in the current month if possible or processed the following month.

For Office Use Only

Other forms you may need for the above change(s):

- Retirement Beneficiary form - www.drs.wa.gov. Quick link to forms or search for forms.
- W-4 form - www.lynden.wednet.edu (HR/Payroll / Payroll Forms)
- VEBA – Call Meritain Health 1-888-828-4953
- Personal payroll deductions (Annuities, Homestead, Credit Unions, Banks, etc.) you will need to contact them directly.

Name Change Checklist
<input type="checkbox"/> Email Address
<input type="checkbox"/> Email Skyward
<input type="checkbox"/> Username Skyward
<input type="checkbox"/> ReadySub
<input type="checkbox"/> SEBB
<input type="checkbox"/> Talent Ed
<input type="checkbox"/> SafeSchools
<input type="checkbox"/> Personnel File
<input type="checkbox"/> Evaluation lists
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Payroll File

RETURN THIS FORM TO HUMAN RESOURCES AT THE DISTRICT OFFICE

HR will provide info to: Payroll / Building / Union Rep / Receptionist