

**SAN MARCOS UNIFIED SCHOOL DISTRICT
CHANGE IN PERSONNEL / PAYROLL RECORDS**

NAME:	I.D.#	SCHOOL / DEPT:
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Please make the following changes to my personnel / payroll records:

<input style="width:100%;" type="text"/>	Address:				
	<table style="width:100%; border: none;"> <tr> <td style="border: none; width:60%;">Street</td> <td style="border: none; width:40%;">Apartment #</td> </tr> <tr> <td style="border: none;">City</td> <td style="border: none;">State Zip Code</td> </tr> </table>	Street	Apartment #	City	State Zip Code
Street	Apartment #				
City	State Zip Code				

PHONE NUMBERS: Please list both numbers or N/A

<input style="width:100%;" type="text"/>	Home Phone: _____	Cell Phone: _____
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<input style="width:100%;" type="text"/>	AESOP LOG-IN	Use Home Phone number	Use Cell Phone number
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<input style="width:100%;" type="text"/>	Name Change: _____
	<i>Please attach a copy of the new, signed Social Security Card for name changes.</i>

<input style="width:100%;" type="text"/>	Other: _____
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Date:	Signature:
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IMPORTANT INSTRUCTIONS FOR THE EMPLOYEE:

- 1. GIVE A COPY OF THE COMPLETED FORM TO YOUR OFFICE MANAGER**
- 2. SEND THE ORIGINAL COMPLETED FORM TO: HUMAN RESOURCES**

Human Resources
Payroll
AESOP
Benefits
Site