



# NAME & ADDRESS CHANGE For Faculty & Staff

This form will change the following Minnesota State Mankato records: Insurance, Library, Human Resources, and Payroll records.

## VALIDATION

<i>This section is for validation only, changes should be made BELOW the dotted line</i>	
1 Name:	2 Date:
2 Social Security Number:	
3 Effective Date of Change:	



**If changing your name, you must present your new Social Security Card in Human Resources.**

## REQUESTED DATA CHANGES

Name and/or Marital Status	
1 New Name:	2 Former Name:
2 Marital Status: <i>(Complete a new W-4 if this has changed)</i>	

HOME ADDRESS		
1 Street 1:		
2 Street 2:		
3 City:	6 State:	7 Zip Code:
8 Home Phone:	8 County:	

**Return to Human Resources WA 336**