

EMPLOYEE NAME / ADDRESS CHANGE FORM



RETURN COMPLETED FORM TO:
Attn: Human Resources Coordinator
Schuylkill Intermediate Unit #29
17 Maple Avenue
P.O. Box 130
Mar Lin, PA 17951
Phone: 570-544-9131 Ext. 1249
Fax: 570-544-2169



Employee Name:	Date:
Position/Department:	Entity:
Type of Request:	<input type="checkbox"/> Name Change <input type="checkbox"/> Address Change

Name Change Request:

Please provide a copy of your Driver's License / Photo ID and Social Security Card reflecting your name change with this request.

Previous Name:
New Name:

Address Change Request:

Please provide a completed Residency Certification Form with this request. This form can be found under the "Forms" section of the Schuylkill Intermediate Unit #29 / Schuylkill Technology Center website.

Previous Address:
New Address:

HR Office Use Only:

Date Received: _____

FIS-HR FIS-Payroll Insurance Life Insurance HSA Form provided to employee (if applicable)

NOTICE to Professional Certificate Holders and Professional License Holders

In addition to completing the form(s), Professional Staff should contact the Teacher Information Management System (TIMS) at www.PA-TIMS.com to update contact information directly online such as name or address changes, and new credentials. The employee must then print the newly-updated Certificate reflecting the employee's new name or credential and bring it into the Executive Director to be witnessed.

PDE - CSPG No. 11 indicates it is the responsibility of each certified individual to keep the Bureau of Teacher Certification and Preparation updated of any name or address changes; and it is the responsibility of the employing school entity to maintain accurate certification records of all professional school employees and an accounting of Act 48 Professional Development requirements. For more information, please visit www.pde.state.pa.us or the Teacher Information Management System (TIMS).

All staff with licenses must contact the Department of State, Bureau of Professional and Occupational Affairs, to reflect name and address changes and to provide the Executive Director with an accurate and current license.