

**PINE PLAINS CENTRAL SCHOOL DISTRICT  
BUSINESS OFFICE**

TEL: (518) 398-7181

FAX: (518) 398-6592

**EMPLOYEE CHANGE FORM**

**TYPE OF CHANGE**

- Address Change
- Name Change
- Phone Number Change
- Emergency Contact Info Change
- Other \_\_\_\_\_

Effective Date: \_\_\_\_\_

**PERSONAL INFORMATION**

Employee Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Last First MI

Address:

Street City State Zip

Mailing Address:

Street City State Zip

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
Area Code Area Code

**EMERGENCY CONTACT INFORMATION**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address:

Street City State Zip

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_  
Area Code Area Code

EMPLOYEE SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

*\*All changes to be made must be submitted no later than 4:00 pm on the last working day of the month in order to be processed by the first payroll of the month.*

For Office Use Only:

- Payroll – Taxes
- Personnel
- Technology / Data
- Benefits
- Retirement System