

**MARION COUNTY SCHOOLS  
PAYROLL CHANGE FORM**

**Complete with current information:**

NAME: \_\_\_\_\_ SS#: \_\_\_\_\_

EFFECTIVE DATE OF CHANGE: \_\_\_\_\_

POSITION: \_\_\_\_\_ WORK LOCATION: \_\_\_\_\_

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**NAME CHANGE:**

FROM: \_\_\_\_\_

TO: \_\_\_\_\_

**Note: Name change for marriage we need a copy of your new Social Security Card  
A name change, other than marriage requires a copy of legal document**

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**ADDRESS CHANGE:**

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ COUNTY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

APT./P.O. BOX \_\_\_\_\_

Home Telephone Number: ( ) \_\_\_\_\_ - \_\_\_\_\_

Cell Phone Number: ( ) \_\_\_\_\_ - \_\_\_\_\_

OTHER: \_\_\_\_\_

Marriage, divorce, tax status changes, pregnancy/acquisition/loss of dependent, address change, etc. require an immediate update in Payroll records. Some changes may only be made within thirty calendar days.

If you have health insurance you must complete a Health Insurance Miscellaneous Update Form from the Payroll Dept.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee Signature