



Human Resources Division  
 65 Stone Street | Cocoa, FL 32922  
 Phone: (321) 433-8440 Fax: (321) 433-8445

## EMPLOYEE PERSONAL CHANGE FORM

**\*\*Employees are responsible for notifying, as applicable, Nationwide, ICMA, PIC, Aflac, FD/PD Pension plans, and FRS of demographic or other personal status changes\*\***

**Legal Name Change** *(SS Card or Court decree is required)*

<b>From:</b>		<b>To:</b>	
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**Marital Status Change**

<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widowed
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**Address Change**

New Home Address:		New Mailing Address:	
Street:		Street:	
City		City	
State:		State:	
Zip:		Zip:	

**Telephone Number Change:**

<b>Home:</b>		<b>Cell:</b>		<b>Work:</b>	
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**Emergency Contact Change**

Primary Contact:		Secondary Contact:	
Name:		Name:	
Relationship:		Relationship:	
Phone:		Phone:	
Alt. Phone:		Alt. Phone:	

<b>Effective Date of Change(s):</b>		<b>Print Name:</b>		<b>Employee ID #:</b>	
<b>Employee Signature:</b>				<b>Date:</b>	

### OFFICE USE ONLY

*The HR Division will contact the applicable benefit providers to inform them of these changes and will update the appropriate systems.*

<input type="checkbox"/>	Bentek	<input type="checkbox"/>	Naviline
	Date:		Date:
	Initials:		Initials: