

# General Person Update

*This form is used to change/update name, address, and telephone number for a general person (employee, student, etc.)*

Name	Social Security Number/Entity Identification Number
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**Please check (✓) and complete all which apply:**

<input type="checkbox"/> Name Change	Previous Name		
<input type="checkbox"/> Address Change <input type="checkbox"/> Mailing <input type="checkbox"/> Permanent Residence <input type="checkbox"/> Purchasing	New Address		
	City		
	State	Country	
	Zip Code		
<input type="checkbox"/> Telephone Number Change  <i>Please check (✓) telephone type(s) and enter number in the appropriate box.</i>	<input type="checkbox"/> Billing	<input type="checkbox"/> Cellular	<input type="checkbox"/> Day
	<input type="checkbox"/> Emergency	<input type="checkbox"/> Electronic Mail	<input type="checkbox"/> Evening
	<input type="checkbox"/> Fax	<input type="checkbox"/> Mailing	<input type="checkbox"/> Pager
	<input type="checkbox"/> Residence	<input type="checkbox"/> Purchasing	<input type="checkbox"/> Vendor

Signature	Date
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**Check all which apply:**       Employee       Student       Vendor

- Distribution:**
- \* If an employee, forward to College/District Human Resources Office.
  - \* If a student, present to College Admissions and Records Office with photo ID.
  - \* If a vendor, forward to District Business Office

Copies to:

Human Resources:

Original-District Human Resources  
 District Payroll Department  
 District Benefits Department  
 College Payroll Department/Designee

College Admissions and Records:

Original-College Admissions & Records

Business Office:

Original-District Business Office