



Office of Human Resources

NAME CHANGE FORM

PLEASE PRINT

EMPLOYEE'S ORIGINAL NAME: _____

SOCIAL SECURITY #: _____

NEW NAME: _____

DOCUMENTATION PRESENTED:

A copy of one of the following:

- ☐ New Social Security Card
☐ Marriage/Divorce Certificate

Document must be presented to Human Resources in order to complete this change.

Employee Signature

Date

RETURN THIS FORM TO HUMAN RESOURCES

The Office of Human Resources is located in Kellenberg Hall, room K011.

Office hours are Monday through Friday 9:00am to 5:00pm

Any questions please contact Human Resources 516-323-3050