

North Carolina Agricultural and Technical State University
Division of Human Resources

Request for Name/Address Change Form

Employee Name: _____ Banner #: _____

SHRA/EHRA Permanent SHRA Temporary EHRA Temporary

NAME CHANGE		<small>Important Note: All name change actions must be initiated through the Form I-9 update process in the Division of Human Resources – Foreign National Employment Office.</small>	
Dr. Mr. Mrs. Ms.	(FROM) Last Name:		
	First Name:	Middle:	
Dr. Mr. Mrs. Ms.	(TO) Last Name:		
	First Name:	Middle:	

ADDRESS CHANGE			
FROM	Street /Route #:	Apt.#:	
	City:	State:	Zip:
TO	Street/Route #:	Apt.#:	
	City:	State:	Zip:

TELEPHONE CHANGE	
FROM	Area Code: _____ Phone #: _____
TO	Area Code: _____ Phone #: _____

CHANGE CAMPUS INFORMATION	
Building Location: _____	
University Telephone: _____	
E-Mail Address: _____	

Printing Options	<input type="checkbox"/> Print All	<input type="checkbox"/> Omit Home Address	<input type="checkbox"/> Omit Home Phone
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I request that the above change(s) be made with an effective date of _____.

EMPLOYEE'S SIGNATURE: _____ DATE: _____

Please review page 2 of this form for additional instructions to complete this process.

RETURN THIS FORM TO THE DIVISION OF HUMAN RESOURCES

Division of Human Resources Use Only:

Name Change	Form I9/Banner Updated	Payroll Notice Date	Benefits Notice Date	Personnel Notice Date
Address Change	Date Banner Updated	Date Benefit Vendors Notified	<i>DHR Representative Signature/Date</i>	

Name Change:

To complete the name change process with the University, the employee must complete the Request for Name/Address Change Form and provide **original** to the Division of Human Resources at 1020 East Wendover Avenue, Room 109 for verification update on the Form I-9 and Banner. ***NOTE: Federal regulations do not allow employers to accept pre-copied, scanned or faxed documents for verification; to complete the name change process the employee must physically visit the Division of Human Resources.***

The Division of Human Resources will provide the proper documentation to the Payroll Office to ensure that the employees name is changed by the next payroll date.

Employees with State Health Plan/NC-Flex/Retirement Benefits:

For those employees that receive University benefits, upon completion of the name change process with the Division of Human Resources, the processing DHR staff person will forward the appropriate documents to the Benefits Office for a Benefits Counselor to complete the name change update with the State Health Plan and NC Flex vendors.

Address Change

To complete the address change process with the University, the employee must complete the Request for Name/Address Change Form and submit to the Division of Human Resources – 1020 East Wendover Avenue, Suite 109.

Student employees must complete the address change process through the Office of the Registrar located in the Dowdy Administration Building, First Floor.

IMPORTANT NOTE

To change name/address for **Retirement benefits**, visit the designated carrier's website at:

TSERS:

- <http://orbit.mynretirement.com/orbit/Common/Pages/BPASLogin.aspx> and register for an ORBIT account.

ORP:

- The employee must contact the designated carrier to submit the name/address change.

Please direct all inquires to the Division of Human Resources at 336-334-7862.