Name Change Form

*All name changes will require an updated Social Security Card be provided to the Human Resources Department.

If you are an **employee of the College** (faculty or staff), please return this completed form to Human Resources, Kearney Building, Room 211.

If you are a student, you must change your name with the Registrar's Office, Kearney Building, Room 211.

Employee Name:	
Employee ID:	
New Name:	
Effective Date of Change:	
Employee's Signature:	
Date:	
Please include a telephone number other than your St. John Fisher telephor of which OIT can contact you should there be questions concerning your na	3
Telephone:	

NOTE: If you participate in the TIAA retirement program, you will need to contact them directly to change your name. Either call 981tB(a)--0.8f (c)-8 (h.t16) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (80 (O0-9.0I)-5.2 (981tB(52 10.8f (c)-8 (h.t16)) TJO y-7 (yo)-2.9 (h.t16)) TJO y-7 (yo)-2.9 (h.t16) TJO y-7 (yo)-