

human resources

DATE:

TO: Risk Management

FROM: Lori Wilson
Assistant Human Resource Officer

RE: ADDRESS/PHONE NUMBER CHANGE

Print Name: _____

New Address: _____

New Home Phone No. _____

PLEASE SIGN HERE _____

___ *Full-Time employee*
___ *Part-Time employee*

Thank you.

LW:ms

***IF YOU DO NOT WISH TO HAVE YOUR ADDRESS AND/OR PHONE NUMBER PUBLISHED.....
PLEASE CHECK BELOW:***

PLEASE KEEP UNLISTED:

___ **ADDRESS**
___ **PHONE NUMBER**

In Case of
EMERGENCY PHONE #: _____ **NAME:** _____

(Please circle: Spouse, In-law, Parent, Friend)

c: () Alumni Association () Payroll () Switchboard
 () President's Office () Academic Affairs () File

s:hr/4joni/forms/address&phone#change

Rev 03/05