

# 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