



Every child, every opportunity, every time!

KALAMAZOO PUBLIC SCHOOLS
1220 Howard Street
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(269) 337-0178 Fax (269) 337-0185

Department of Human Resources
Sheila Dorsey-Smith, Assistant Superintendent

EMPLOYEE UPDATE FORM

PLEASE PRINT ALL INFORMATION

Position/Bldg.: _____

Name: _____

Employee ID #: _____

New Name: _____

New Address: _____

City: _____ State: _____ Zip: _____

New Phone No.: _____

The name in this payroll system is used to transmit tax and retirement information to the Federal and state governments. The name used in the District records must be the same as that recognized by these governmental agencies. The name on file with the Social Security Administration determines the name the district must use.

If you are changing your name, a correct copy of a New Social security Card must be attached, if it is not, the change cannot be processed.

I hereby authorize Human Resources to make the changes indicated above.

In the case of a name change, please provide this information to Technology Services to update my KPS email.

Employee's Signature

Date

Internal Use Only:

Address/Phone Update:

_____ MUNIS

Name Change:

MUNIS
Technology Services
Employee File updated
Accounts Payable
Seniority Booklet
Benefits

Updates: 01.20.2020