

DENTON COUNTY CHANGE FORM

PLEASE COMPLETE ALL OF SECTION A.

SECTION A:

Name: _____
(Please Print)

Department: _____

Last Four Digits of Social Security Number: _____

COMPLETE SECTIONS B-E WHERE CHANGES ARE BEING MADE.

SECTION B: CHANGE OF LEGAL NAME

New Name: _____
(Must have a new SS card in order to change name on Denton County records)

SECTION C: CHANGE OF MARITAL STATUS

New Status: Single _____ Married _____

SECTION D: CHANGE OF PHYSICAL ADDRESS/MAILING ADDRESS

Physical Address: (Street) _____ (Apt. #) _____
(City) _____ (State) _____ (Zip Code) _____

Mailing Address: (Street) _____ (Apt. #) _____
(City) _____ (State) _____ (Zip Code) _____

SECTION E: CHANGE OF PHONE NUMBER

Previous Phone # _____ New Phone # _____

Employee Signature

Date

Please complete and return form to Human Resources.