



City of Milpitas Employee Change Request Form

Section A: Action Type

- Name Change (Section B, C and G)
- Address Change (Section B, D and G)
- Telephone Number Change (Section B, E and G)
- Emergency Contact Change (Section B, F and G)

Section B: Employee Info

| | |
|--|--|
| Employee Name | |
| Social Security Number Employee ID Number | |
| Effective Date of Change | |

Section C: Name Change

| | |
|----------|--|
| New Name | |
|----------|--|

Section D: Address Change

| | |
|--|--|
| Employee Address (Street, Rural Route or PO Box) | |
| City | |
| State | |
| Zip | |

Section E: Telephone Number Change

| | |
|------------------|--|
| New Phone Number | |
|------------------|--|

Section F: Emergency Contact Change

The following people will be notified in the event of an emergency

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: () _____ Cell Phone: () _____ Work Phone: () _____

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: () _____ Cell Phone: () _____ Work Phone: () _____

Section G: Employee Signature

| | |
|--------------------|------|
| Employee Signature | Date |
|--------------------|------|