

THE UNIVERSITY OF ALABAMA®

Department of Human Resources Address and Name Change Form

If this change has been requested in myBama, you do not need to complete this form. Direct questions to HR Service Center (205) 348-7732.

PLEASE PRINT CLEARLY AND COMPLETE ONLY THE SECTIONS REQUIRING UPDATES.

Name: _____ **CWID:** _____

Current Status: ☐ Employee ☐ Retiree **Last 4 Digits of SSN:** _____

☐ **Name Change:** *Name changes can only be processed after you obtain an updated Social Security Card with the new name. A copy of the card must be presented to make the change. The name will be changed to what is listed on the Social Security Card.*

Current Name on File: _____

New Name: _____

☐ **Address Change**

If address is *temporary*, please indicate From/To dates: **From:** _____ **To:** _____

New Mailing Address: _____

Local Phone: (____) _____ - _____ ☐ Add ☐ Change ☐ Delete ☐ Make Primary

Campus Phone: (____) _____ - _____ ☐ Add ☐ Change ☐ Delete ☐ Make Primary

Cell Phone: (____) _____ - _____ ☐ Add ☐ Change ☐ Delete ☐ Make Primary

Personal Email Address: _____

Notice to Employees: By completing and submitting this form, you authorize The University of Alabama to change your personal information in myBama for payroll and benefits purposes.

Notice to Retirees: Human Resources will notify all benefit providers of address changes with the exception of Teachers' Retirement System (TRS). TRS requires that members complete, sign and submit their address change form. The form can be accessed at www.rsa-al.gov/trs/forms/.

Signature: _____ **Date:** _____

**Return completed form to
HR Service Center by:**

Mail: Box 870174
Tuscaloosa, AL 35487

Fax: (205) 348-8755

Email: hr@ua.edu

HR Use Only (Initial): _____ Banner _____ Retirement Database _____ Benefit Providers