

FOREST HILLS LOCAL SCHOOL DISTRICT

**CHANGE OF ADDRESS/NAME**

**NAME:**

**DATE:**

**BUILDING:**

**NAME CHANGE TO: (if applicable)**

**NEW ADDRESS**

(Street & No.)

(City)

(State)

(Zip)

Phone No.

Effective Date:

My new address is located in the

School District

(The school district name and community information is required to comply with state and community law).

Employee Signature

The change of address/name form is to be made out in triplicate and sent to the Personnel Office.  
Distribution: 1) Payroll 2) Building Principal/Supervisor 3) Personnel File