

UNIVERSITY OF
THE INCARNATE WORD



Human Resources

4301 Broadway CPO 320, San Antonio, TX 78209
Telephone: (210) 829-6019; Fax: (210) 829-3847

Change of Name, Address, or Telephone

Please complete this form and return to the Office of Human Resources, CPO 320.
If mailing, send to: Human Resources, CPO 320, University of the Incarnate Word, San Antonio, TX 78209.

NAME CHANGE:

Identification Number: _____

Change Name From: _____

Change Name To: _____

Original social security and/or official court documents showing your correct name must be presented.

ADDRESS/TELEPHONE CHANGE:

Change From:

Change To:

Street: _____

Street: _____

City: _____

City: _____

State/Zip: _____

State/Zip: _____

Telephone: _____

Telephone: _____

Effective Date: _____

EMPLOYEE CLASS

____ Full-Time / Part-Time Faculty

____ Full-Time / Part-Time Administrator

____ Full-Time / Part-Time Staff

____ Full-Time / Part-Time Religious

____ Federal / State Aid Student

____ No Aid Student

Signature: _____

Print Name: _____

Date: _____

