



Name and/or Address Change Form

To: Glen Oaks Community College
Human Resources
62249 Shimmel Road
Centreville, MI 49032

From: _____ (Employee Name)

Please Print

Change of Name and/or Address

Active Employee

Retired Employee

Old Name: _____
Last First MI

New Name: _____
Last First MI

New Address: _____
Street Apt.

_____ City State Zip

Phone Number: _____ - _____

Employee/Retiree Signature

Human Resources Signature

Date

Date