



Medford Public Schools
Human Resources Department
 489 Winthrop Street
 Medford, MA 02155
 781-393-2100

**Employee Change of:
 Name, Address and Phone Number Form**

Employee Change of Name

Today's Date: _____

Current Name: _____
Last First Middle

Name Changed to: _____
Last First Middle

*** PLEASE NOTE: If you are licensed by the DESE, your name must be changed on their record first. ***

Employee Change of Address

New Address: _____
Street Address Apt/Unit #

City State Zip Code

Home Phone #: () _____

Cell Phone #: () _____

School: _____ Position: _____

**** IT IS THE EMPLOYEES RESPONSIBILITY TO INFORM YOUR HEALTH AND DENTAL COMPANY AS WELL AS THE CREDIT UNION OF ANY "CHANGE OF INFORMATION". CONTACT THE TECH DEPT REGARDING UPDATING YOUR EMAIL. THANK YOU

Please email form to: humanresources@medford.k12.ma.us