

NAME CHANGE FORM

Changing your name for Payroll records at ISU requires:

1. Complete Section A of this form.
2. Show a picture ID and the original of your NEW social security card in the Records Management Office at 3810 Beardshear Hall. Or show these ID's to a representative in your department for completing Section B of this form and then mail or deliver the completed form to the Records Management Office.

Section A - Employee to Complete

1. Name prior to the change: _____ SS# _____
2. Exact date of name change event: (i.e. marriage, divorce, etc.) _____
3. You may also want to complete a new W-4 available in the Records Management Office, 3810 Beardshear Hall.

Signature of Employee

Date (month/day/year)

Section B - Employer to Complete

You **must** see a picture ID and employee's New Social Security Card. Payroll records will be updated to show employee's name as it appears on their NEW social security card.

Please complete this section and forward the original to the Records Management Office.

1. PRINT the name exactly as it appears on the Social Security Card:

I certify the employee presented the above social security card and it appeared to be genuine and related to the employee.

Signature of Authorized Representative & Title

Date (month/day/year)
