



NEW BEDFORD PUBLIC SCHOOLS

PAUL RODRIGUES ADMINISTRATION BUILDING

455 County Street, New Bedford, MA 02740

www.newbedfordschools.org (508) 997-4511

Employee Information Change Form

Employee Name: _____ SS#: _____

School/Building: _____

Check all that apply: ☐ Name change ☐ Address Change ☐ Phone Number Change ☐ Emergency Contact Change

Name Change

Note: Legal name changes require 1 of the following: gov't issued ID, social security card, or marriage certificate with new name. Complete a new email application for school email to reflect this change.

New Legal Name: _____

Document provided: ☐ State ID or passport ☐ Social Security Card ☐ Marriage Certificate

Changed with DESE (if licensed) ☐ Yes ☐ No - ([link to DESE name change form](#))

Address Change

New Address: _____

City: _____ State: _____ Zip code: _____

Phone Number Change

New Primary Phone Number: _____

Emergency Contact Change

Primary Contact:

Name: _____ Relationship: _____

Phone (1): _____ Phone (2): _____

Secondary Contact:

Name: _____ Relationship: _____

Phone (1): _____ Phone (2): _____