



School for Children with Alternative Learning Styles
Developmental Individual Relationship-based Intervention®

www.celebratethechildren.org

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Phone: 973-989-4033 Fax: 862-244-9055

CHANGE OF EMPLOYEE INFORMATION FORM

EMPLOYEE NAME: _____

POSITION: _____

Please indicate changes to your personal information below. Return signed form to the Business Office.

NEW ADDRESS: _____

NEW NAME: *(please provide a copy of your social security card as proof of legal name change)*

NEW TELEPHONE NUMBER:

NEW/ALTERNATE EMAIL ADDRESS:

OTHER:

Employee Signature: _____ **Date:** _____

For Business Office Use Only:

Payroll updated _____ PeopleTrak updated _____ Honeywell updated _____