



CITY OF SAN CLEMENTE EMPLOYEE PERSONAL DATA CHANGE FORM

Employees are required to notify the City’s Human Resources Department upon a change of address, phone number, name, or email address. You **MUST** contact HR if you are changing counties. If you have a name change, you will need to provide Human Resources with a copy of your new Social Security card, new driver’s license, and marriage certificate if applicable.

Please complete the appropriate blanks below and send the original form to Human Resources. HR will notify CalPERS, Delta Dental, VSP, ICMA, and Payflex. Please note that it is your responsibility to contact all other providers on the attached list that pertain to you and notify them of your recent personal information change. **It is very important that you contact all of the plans you’re enrolled in so they will have your current information on file.** Please call 361-8353 if you have any questions.

EFFECTIVE DATE: _____ **EMPLOYEE NAME:** _____
(Please Print)

PLEASE MAKE THE FOLLOWING CHANGE(S):

NEW ADDRESS: ****** IF YOU ARE CHANGING COUNTIES, YOU MUST MEET WITH HR ******

NEW PHONE #: _____

NEW NAME: _____

NEW EMAIL ADDRESS: _____

Employee Signature

For Human Resources Use Only:

For changes to: address - phone - name

- Delta Dental
- CalPERS
- EDEN
- PayFlex
- VSP
- ICMA

For email address changes:

- E-user
- EDEN

For name changes (Required Forms):

- Copy of new Social Security Card
- Copy of marriage certificate
- Copy of new Driver’s License
- New W4 Form
- Update I-9 Employee Eligibility Verification
- ICMA Name Change Form
- Beneficiary Forms: CalPERS, Standard, ICMA
- Designation of Person to Receive Checks

For name changes (HR Notify):

- IT & Payroll
- CalPERS, VSP & Delta Dental, Payflex
- EDEN – Name & Marital Status