



OXNARD SCHOOL DISTRICT

1051 South "A" Street • Oxnard, California 93030 • 805/385-1501

Certificated Employee NAME CHANGE

Date : _____

Please change your records as listed below:

Former Name: _____

NEW NAME: _____

Address: _____

City	State	Zip
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Phone Number: (_____) _____

School / Location: _____ Grade/Subject: _____

SS# _____ PSL#: _____
(Social Security Number is necessary and is for office use only)

Distribution:

- Risk Management
- Insurance
- OEA
- Employee's Location
- Payroll
- Attendance
- IT

<p><u>For Office Use:</u> Escape: _____ Files: _____ SmartFind: _____ I-9: _____</p>
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