

**RIVERSIDE COMMUNITY COLLEGE DISTRICT**

**Name/Address Change Form**  
for  
**District and Student Employees**

Riv    MV    Nor    "

Name Change  
Address Change  
(Check one or both if applicable)

Yes    No

Information to be confidential:    Yes    No

**Check all that apply to you as an employee:**

Full-Time Faculty/Counselor/Librarian  
Management/Supervisor  
Classified/Confidential  
Child Development  
Short-Term/Substitute  
Part-Time Faculty/Counselor/Librarian  
Member of the RCC Foundation  
Student Employment

**PROCEDURES**

District Employees Original Name/Address Change Form must be submitted to the Diversity & Human Resources Office along with a new Social Security Card showing new name (SS Card for name changes only)

Student Employees Original Name/Address Change Form must be submitted to the Student Employment Office along with a new Social Security Card showing new name (SS Card for name changes only)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**For Diversity & Human Resources/Admissions & Records Use Only**

Changes entered on: \_\_\_\_\_ Date      Completed by: \_\_\_\_\_ Name

Distribution:    \_\_\_\_\_ Department/Student Employment  
                  \_\_\_\_\_ Diversity & Human Resources (District Employees Only)  
                  \_\_\_\_\_ Admissions & Records (Student Employees Only)  
                  \_\_\_\_\_ Payroll  
                  \_\_\_\_\_ Benefits Specialist  
                  \_\_\_\_\_ Purchasing Manager

