

LAFAYETTE COLLEGE
ACTIVE EMPLOYEE CHANGE OF ADDRESS/NAME FORM

Please Print

NAME _____

L # _____

PREVIOUS NAME _____
(please bring in proof of name change to HR)

- Please check if you would like your Lafayette email to change as a result of your name change

NEW ADDRESS _____

NEW TELEPHONE NUMBER _____

- Cellphone
 Home Phone

EFFECTIVE DATE _____

Signature _____

PLEASE RETURN TO OFFICE OF HUMAN RESOURCES, 12 MARKLE HALL
LAFAYETTE COLLEGE, EASTON, PA 18042