



## Personal Information Change Form

Please return original signed form to the District HR Office at 333 East 8<sup>th</sup> Street, Oakland CA 94606.

\*OR, visit the Employee Self Service section in [PROMT](#) to update your personal information.

**For name change only:** Please bring your original social security card to the HR office to verify identity and new name.

Employee ID#: \_\_\_\_\_ College: \_\_\_\_\_

Check one:

Management  Classified  Faculty  Hourly/Short-term  Retiree  Student Worker

Current Information:

<b>First Name</b>		<b>Middle Initial</b>	<b>Last Name</b>		
<b>Street</b>		<b>City</b>	<b>State</b>	<b>Zip Code</b>	
<b>Phone #</b>		<b>Email</b>			

New Information:

*Name Change*

<b>First Name</b>		<b>Middle Initial</b>	<b>Last Name</b>		

*Address Change*

<b>Street</b>		<b>City</b>	<b>State</b>	<b>Zip Code</b>	
<b>Phone #</b>		<b>Email</b>			

By signing this form, I authorize Peralta to update my information.

Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_