

## **Bay City Independent School District**

520 Seventh Street • Bay City, Texas 77414 • (979) 401-1005 • Fax (979) 245-3175

## NAME CHANGE FORM:

For an employee to change his/her name on official BCISD records, both of the following original documents must be presented in person to the Human Resource Department at the Administrative Building along with this sheet.

stProviding original documentation in person to the Human Resource Department has protected employees from identity theft and

- 1. An **original social security card** showing the employee's new name.
- 2. An original valid photo ID (ex., driver's license) showing the employee's new name.

ensures that earnings a	re reported correctly to	) TRS.**			
Employee ID Number: _	Campus/Dept:		Last 4 digits of SS#		
Current Name on your (	Official BCISD Records				
	(Please Print):	Last Name	First Name	MI	
New Name on your Offi	cial BCISD Records :				
	(Please Print):	Last Name	First Name	MI	
I request my name be c	hanged on official BCIS	D records to match my so	ocial security card.		
	(Employee Signatur	(Date)			

Before coming to the Administrative Building, please contact Jordan Krauskopf to make arrangements to change to your records. Below is the Administrative Buildings address and her contact information.

## **Contact Information:**

Administrative Building Attn: Jordan Krauskopf 520 7<sup>th</sup> Street Bay City, TX 77414 jkrauskopf@baycityisd.org