



City of Roswell  
Records Change Request

**PERSONAL INFORMATION:**

Name: \_\_\_\_\_ SSN: --  
Previous name: \_\_\_\_\_ City Empl #:

**MARITAL CHANGE:**

Single  Married  Divorced Effective date: \_\_\_\_\_

**ADDRESS CHANGE:**

**Old Address:**  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_

**New Address:**  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:**

Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
Relationship:  Spouse  Child  Fiancée  Friend  In-Law  Parent  Sibling  Other

Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
Relationship:  Spouse  Child  Fiancée  Friend  In-Law  Parent  Sibling  Other

*With these changes, you may need to change the information with insurance, retirement (PERA),  
Deferred Comp and the IRS (W-4).*

\_\_\_\_\_  
Signature Date

**HUMAN RESOURCES OFFICE USE ONLY**

Entered:  HTE Date Received: \_\_\_\_\_