

ORO GRANDE ELEMENTARY SCHOOL DISTRICT

Please mark the appropriate change:

Name Change

Address Change

Employee Legal Name: \_\_\_\_\_  
First (Please Print) M.I. Last

Employee Previous Name: \_\_\_\_\_  
First (Please Print) M.I. Last

Current Address: \_\_\_\_\_  
\_\_\_\_\_

Home #: \_\_\_\_\_ Cell #: \_\_\_\_\_

SS#: \_\_\_\_\_ Email Address: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**In the case of a name change, please submit a copy of your new social security card and driver's license.**

**CalPERS Members Only: In the case of an address change please submit a utility bill in your name.**

**Please submit this form with applicable documentation to the District Office.**

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**DISTRICT USE ONLY**

Name Change:

\_\_\_\_\_ Update EPICS, Aesop & Target Solutions

\_\_\_\_\_ Update Access Upload File

\_\_\_\_\_ Social Security Card- (copy)

\_\_\_\_\_ New AESD1 Form (PERS Only)

\_\_\_\_\_ Driver's License- (copy)

\_\_\_\_\_ Inform IT, CBEDS & AP

\_\_\_\_\_ Update Benefits

\_\_\_\_\_ Kaiser (Send out new ID Cards)

\_\_\_\_\_ Anthem Blue Cross (Send out new ID Cards)

Address Change:

\_\_\_\_\_ Update EPICS

\_\_\_\_\_ Update Access Upload File

\_\_\_\_\_ New AESD1 Form (PERS Only)

\_\_\_\_\_ Inform CBEDS & AP

\_\_\_\_\_ Update Benefits

\_\_\_\_\_ Kaiser

\_\_\_\_\_ Anthem Blue Cross