

EAGLE MOUNTAIN-SAGINAW ISD
Employee Information Changes

**If you change your information through Skyward Employee Access,
it is not necessary to fill out this form.**

**Name changes must be accompanied by a new social security. Please print information and
return this form with the appropriate documentation to the Human Resources Office.**

Current Information:

Legal Name _____

SSN _____ Telephone Number _____

Address _____

City _____ State _____ Zip _____

Current Novell Log-In _____ (name change purposes only)

District Email Address _____

New Information:

Legal Name _____

SSN _____ Telephone Number _____

Address _____

City _____ State _____ Zip _____

Reason for Change: _____

Date Changes are to be Effective: _____

Employee Signature

Date

Campus

Position

For HR Use Only		
I-9	File Changed	AESOP
Skyward	Eduphoria	Copy SS card payroll