

FACULTY/STAFF/GRADUATE ASSISTANT/RETIREE/STUDENT EMPLOYEE CHANGE OF ADDRESS FORM

SOUTHERN ILLINOIS UNIVERSITY

Please print or type.

Changes in legal name or number of tax allowances must be made on W-4 form.

I am paid: Monthly Semi-Monthly Bi-Weekly (Civil Service) Bi-Weekly (Student)

or I am a: Retiree Former Employee

Legal Name: _____
Last First Middle

Spouse Name: _____
Last First Middle

Street: _____ Apt. #: _____

City: _____

State: _____ County: _____ Zip Code: _____

Country: _____

Home Phone: _____ Cell Phone: _____

If you prefer the following information to be restricted, please check the appropriate box:

ADDRESS PHONE ADDRESS AND PHONE

I understand this address replaces any previous mailing address submitted to Southern Illinois University on a W-4 form, or Change of Address Form. This change will be processed in the Human Resource Management System (HRMS) according to the effective date below or the date the form was received for processing, whichever is later.

Effective Date of Change

Employee Signature

Date

Please mail completed form to:

Carbondale campus: Human Resources, 6520
Springfield campus: Human Resources, 9601

Last 4 of SSN or AIS # *
(Required)

*Employees can find AIS #
on SIU ID Card or Deposit
Advice. Student employees
can find AIS # on Salukinet.

For Office Use Only

HR Benefits

HR Employment

____ AIS

____ HR Pro

____ International Tax

____ CMS

____ E-Test

____ HR Payroll

____ SURS

____ Intern