Carbondale Campus End User Instructions
FORM – Faculty/Staff/Graduate Assistant/Retiree Change of Address

**Use:**
To inform the University of a change in home mailing address or home phone and/or to request suppression of the printing of this information in the *Staff Directory*.

**Access:**
Obtain necessary form(s). Electronic forms are available through the eforms website [eforms](http://eforms.siu.edu/siuforms/info/hro1008.html)

**Instructions:**
Complete the form using the following instructions. Unless noted, all fields are **REQUIRED**.

**Legal Name**
The individual's full legal name, including last, first and middle names.

**Spouse Name**
Name of the individual's spouse, including last, first and middle names.

**Street**
Street address of the individual's home mailing address.

**City**
City of the individual's home mailing address.

**State**
State of the individual's home mailing address.

**Zip Code**
Zip code of the individual's home mailing address.

**Country**
Country of the individual's home mailing address.

**Home Phone**
Individual's home phone number, including area code.

**Directory Information**
Mark whether the individual wishes to suppress printing of home address, home phone or both in the *Staff Directory*.

**Effective Date of Change**
Enter the date this change should take effect. (Date format DD Mmm YYYY)

**Signature and Date**
Signature of the individual and the date signed. (Date format DD Mmm YYYYY)
Employee or HRMS ID or Social Security Number
Either the employee or HRMS ID or the Social Security Number must be provided.

Special Notes: This form may not be used to report any changes in legal name or number of tax allowances. Such changes must be made using the W-4 form.

Routing: This form may be submitted to: Human Resources, MC 6520 or Payroll, MC 6820.