

ARKANSAS TECH UNIVERSITY
PERSONNEL DATA CHANGE/UPDATE FORM

Russellville: _____
Ozark Campus: _____

****CERTIFIED DOCUMENTATION IS REQUIRED WHEN MAKING CHANGES TO NAME, SSN, AND MARITAL STATUS.**

Documentation and form should be brought to Human Resources, Brown Hall, Suite 420 for updating. Acceptable documents for name changes include court documents, Social Security Card, and Driver's License. Social Security card is required to update name changes.

Employee's Name: _____ Banner T Number: _____

If name change, please provide previous name: _____ (Documentation Required)

ADDRESS/PHONE NUMBER CHANGE

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Home Phone Number: _____ Primary Unlisted Cell Phone

CITIZENSHIP OR MARITAL STATUS CHANGE (Documentation Required)

Citizenship: Citizen Non-Citizen Resident Alien

Marital Status: Married Divorced Single Widowed

EMERGENCY CONTACT CHANGE

Last Name: _____ First Name: _____

Relationship: _____ Phone #: _____

Address: _____
Street City State Zip

ADDING DEPENDENTS (to add eligible dependents: Spouse, Children)

Legal Full Name: _____ Relationship to Employee: _____

Date of Birth: _____ Gender: Male Female

Attending College: Yes No Social Security Number: _____

Legal Full Name: _____ Relationship to Employee: _____

Date of Birth: _____ Gender: Male Female

Attending College: Yes No Social Security Number: _____

FOR HUMAN RESOURCES USE ONLY

DATE AND SIGNATURE OF HR REPRESENTATIVE THAT RECEIVED COMPLETED FORM:

DATE BANNER SYSTEM UPDATED:

PPAIDEN (Name, Address, Citizen/Marital status and/or EM) PEAEMPL (SSC/Name Change) PDABENE (Dependents)

BENEFIT SYSTEMS TO UPDATE FOR NAME/ADDRESS CHANGES

APERS _____

ONCE THE ABOVE AREAS HAVE BEEN UPDATED, SCAN AND SAVE IN APPX UNDER EMPLOYEE INFO FORM