

Medical Lake School District

116 W Third Street, PO Box 128
Medical Lake, WA 99022



Phone: (509) 565-3100
FAX (509) 565-3102 www.mlsd.org

NAME OR ADDRESS CHANGE

ADDRESS CHANGE:

Address changes may be submitted via email to the Payroll Department at jpaige@mlsd.org.

NAME CHANGE:

In order to ensure that the necessary paperwork is filled out, employees with name changes need to come to payroll. Employees **must** submit a **new Social Security card or a receipt from the Social Security Office** before the change can be made. Please print the completed form and bring it with you to the payroll office.

Current/New Name	
Former Name <i>(if applicable)</i>	
New Street Address	
City, State, Zip	
New Phone	

If this is an address change, does it affect just you or your entire family?

Self only _____

Family _____

Names _____
