

PALO VERDE UNIFIED SCHOOL DISTRICT
CHANGE OF ADDRESS FORM

Name: _____ Date: _____

Home Address: _____ New () or Same ()

Mailing Address: _____ New () or Same ()

Phone Number: _____ Cell Phone Number: _____

E-mail: _____ Job Location: _____ (Sub: Y or N)/(Retiree: Y or N)

If you are a CalPERS or CalSTRS member, don't forget to go to their website to update your change of address with them.

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**ROUTING-DISTRICT OFFICE USE ONLY**

Certificated Personnel

Classified Personnel

Benefits

Purchasing

**Please return to the Personnel Department at the District Office**