

# School District of Lodi

## **\*Employee Address, Phone Number and Name Change Form**

Directions: Fill out the executable form following and send to Lodi Schools District Office,  
Attn: Human Resources

<i>Name:</i>	
<i>Location/Position:</i>	

*Changes are as follows:*

<i>Name:</i>	
<i>Mailing Address:</i>	
<i>City:</i>	
<i>State:</i>	
<i>Zip:</i>	
<i>Phone Number:</i>	
<i>Effective Date: (required)</i>	