CHAUTAUQUA COUNTY DEPARTMENT OF HUMAN RESOURCES GERACE OFFICE BUILDING •3 NORTH ERIE STREET MAYVILLE, NEW YORK 14757-1007

Phone: (716) 753-4237 • Fax: (716) 753-4686 • Website: https://chqgov.com • E-MAIL: cchrs@chqgov.com

APPLICANT CONTACT CHANGE FORM

NOTE: Your new contact information provided below will **ONLY** be used to update your employment and/or application records.

EMPLOYEES OF CHAUTAUQUA COUNTY GOVERNMENT ONLY: Employees must utilize the Employee Portal to update their contact information. Please refer to the additional information on the reverse side of this form.

□ Current Employe	ee #	<u> </u>			
Effective Date:	Soc	ial Security Νι	ımber-Last Four Only: _		
<u>Name</u>			New Name		
Last Name	First Name	MI	Last Name	First Name	MI
Former Home Address			New Home Addres	s and Phone No.	
Street			Street		
City	State	Zip	City	State	Zip
			Phone Number		
New Personal Email	Address:				_
If you are changing address:	your address	please compl	lete the legal residence	information bel	ow for your new
	School District				
	City or Village	of			
	Town of				
	County of				
	State of				
employment. Section has practiced, or atten	50 of Civil Service npted to practice, nt may be disqua	e Law provides to any deception of lified. You may	This declaration is part of y that any candidate who has or fraud in his application, in be required to produce do ed above.	s intentionally made n his examination, o	a false statement or r in securing his
Signature		Dat	te		

<u>Additional information for County Government Employees Only</u>: If you changed your name and/or your home address, please complete the necessary tasks listed below that pertain to your situation.

NAME AND ADDRESS CHANGE CHECKLIST
□ NYS Retirement - New York State and Local Retirement System, forms are available at www.osc.state.ny.us/retire/forms/index.php then click on forms. "Name Change Notice RS 5483" or if you've had a change in your beneficiaries "Designation of Beneficiary RS 5127" or "Designation of Beneficiary – Trust RS 5127-T".
□ NYS Deferred Compensation - New York State Deferred Compensation forms are available at www.nysdcp.com then click on forms. Under the section labeled "Changing Your Account" you will find forms such as "Address Change Form", "Beneficiary Change Form" and "Deferral Updates". You may also contact them directly at 1-800-422-8463.
□ E-Mail Account - If your name has changed, you may need to have your County e-mail account updated. This form is available on the Chautauqua County Intranet website under the Information Technology department. The " <i>Add-Change-Remove User Form</i> " should be completed by either you or your department head and submitted to the Information Technology department in order to process your request.
□ Desk Phone Caller ID/County Phone Directory - If your name has changed, you may also need to have your telephone extension or name changed on your desk telephone and on-line within the Chautauqua County Directory. This may be completed by notifying the IT Help Desk at X-4281.
□ <u>Union</u> - If your contact information has changed, you may need to notify your respective Union by making contact with one of your union's officials. CSEA members may call 1-800-342-4146.
□ County ID Badge - If your name, department or title has changed you may need to obtain a new County ID Badge. This may be done by contacting the Human Resources office at Ext. 4237.