Return form to Controller’s/Payroll Office:
Guggenheim 224 · 1500 Illinois St. · Golden, CO  80401

Change of Address/Name Form

(Please Print Legibly)

Name: ____________________________________________    CWID: __________

New Name: __________________________________________
(Requires new Social Security Card and I-9 Update)
(If name change affects benefits, you will need to provide proof of change)

New Address: _______________________________________

___________________________________________________

Telephone Number  Home: ________________________  Cell: ________________________

(Please Check One)

☐  Students - All Students must notify the Registrar’s Office of name changes

   ☐ Undergraduate  ☐ Graduate

☐  Classified Staff – You may change your address with PERA on the COLORADO PERA website https://www.copera.org/colorado-pera or please request a PERA change of address form.

☐  Faculty Retirement Accounts:
If PERA member please change your address on the COLORADO PERA website https://www.copera.org/colorado-pera or request a PERA change of address form. If MDCP participate, log onto VALIC site and update your information.

Faculty: Please check appropriate box IF you would like the HR Department to change your address with:

   ☐  Anthem Medical/Dental/Vision Insurance
   ☐  24Hour Flex

ALL EMPLOYEES ARE RESPONSIBLE FOR NOTIFYING YOUR VOLUNTARY RETIREMENT PLAN PROVIDERS (403B/457)

Employee Signature: _____________________________ Date: __________