VANDERBILT

HUMAN RESOURCES

Personal Information Change Form

I am submitting this form to change my (check all that apply and complete form with new information):

☐ address ☐ name ☐ phone ☐ marital status ☐ military status

TO SUBMIT A NAME CHANGE, ATTACH A COPY OF YOUR NEW SOCIAL SECURITY CARD, OR THE 'RECEIPT FOR APPLICATION' FOR A NEW CARD

_____ (_____) _____ _____/_____/ _____

Employee ID or Social Security Number | Home Phone Number | Date of Birth

_____ _____ _____

Last Name | First Name | M.I.

_____ _____ _____ _____

Home Mailing Address | City | State | ZIP

Married: ☐ Yes ☐ No TO SUBMIT A MARITAL STATUS CHANGE, ATTACH A COPY OF YOUR MARRIAGE CERTIFICATE OR DIVORCE DECREE

Military Information *(Check all that apply)*

☐ Not applicable

☐ Disabled Veteran	a veteran 1) of the U.S. military ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs, or 2) who was discharged or released from active duty because of a service-connected disability
☐ Vietnam-Era Veteran	a veteran whose active military, naval or air service was during the period August 5, 1964 through May 7, 1975 who served on active duty for more than 180 days and was discharged with other than a dishonorable discharge or because of a service-connected disability
☐ Other Protected Veteran	a veteran who served on active duty in the U.S. military ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized, under the laws administered by the Department of Defense
☐ Armed Forces Service Medal Veteran	a veteran who, while serving on active duty in the U.S. military ground, naval or air service participated in a U.S. military operation for which an Armed Forces Service Medal was awarded pursuant to Executive Order 12985 (61 FR 1209, 3 CFR, 1996 Comp., p. 159)
☐ Recently Separated Veteran	a veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military ground, naval or air service

Military Status: ☐ Active Reserve ☐ Inactive Reserve Separation Date _____/_____/_____

Vanderbilt is committed to principles of equal opportunity and affirmative action. Vanderbilt is committed to a policy of non-discrimination in employment and education and complies with the requirements of the Americans with Disabilities Act of 1990 (ADA) and the Rehabilitation Act of 1973, which prohibit discrimination against persons with disabilities. If you have questions or concerns pertaining to accommodation services for people with disabilities contact the Disability Program Director, Opportunity Development Center, VU Station B #351809, 2301 Vanderbilt Place, Nashville, TN 37235-1809; phone 615.322.4705 (V/TDD); fax 615.343.0671; Web site www.vanderbilt.edu/odc.

Processing Office Use Only

Pay Group _____

Employee ID # _____

Entered by _____

Audited by _____

Date Received in Processing

_____ _____

Signature | Date

Mail form to: Vanderbilt HR Processing, VU Station B #357718, 2301 Vanderbilt Place, Nashville, TN 37235-7718

Deliver form to: HR Processing, 975 Baker Building, Nashville, TN 37203