

**PERSONAL INFORMATION CHANGE
& EMERGENCY CONTACT INFORMATION UPDATE FORM**

EFFECTIVE DATE: _____

EMPLOYEE NAME: _____ **EMPLOYEE #:** _____

NAME CHANGE: FROM : _____

TO : _____

Copies of documentation need to be attached (marriage certificate, divorce decree, etc.)

ADDRESS CHANGE: FROM: _____

TO: _____

TELEPHONE # CHANGE: FROM: _____

TO: _____

EMERGENCY CONTACT INFORMATION:

Name: _____ **Relationship:** _____

Address: _____

Home Phone: _____ **Work/Cell Phone:** _____

EMPLOYEE SIGNATURE: _____ **DATE:** _____

This completed form should be directed to the Superior Court Personnel Office at 401 E. Spring Street, Kingman, AZ 86402. Phone # (928)718-4928, Fax (928)753-8908.