

SOUTH TEXAS COLLEGE Employee Change of Address Form

Office of Human Resources ● PO Box 9701, McAllen TX, 78502 ● Phone: (956) 872-4448 ● Fax: (956) 872-3810 *Please Print*

EMPLOYEE NAME	EMPLOYEE ID	
New Mailing Address		
Address line 1:		
State/Province/Region:		
If different from above	New Physical Address	
Address line 1:		
State/Province/Region:		
Country:		
	New Telephone Number	
Cell Phone:	Work Number:	
Area Code	Area C	
	ormation above is the best of my knowledge and belief true, conalso update my insurance and TRS records, as well as delivery of	
Signature	Date	
FOR HR USE ONLY		
Employee's E-Class	Entered By	Date