

SCHOOL BOARD OF BREVARD COUNTY

NAME CHANGE or ADDRESS CHANGE

PLEASE PRINT ALL INFORMATION IN ${\it BLUE}$ INK

EMPLOYEE NAME		EMPLOYEE ID	
JOB TITLE		SCHOOL/DEPT.	
CURRENT EMPLOYEE STATUS:	ACTIVE	☐ FRS RETIREE	☐ REEMPLOYED FRS RETIREE
NAME CHANGE			
*Attach signed copy of new Social Security card. Duplicate card can be obtained from local Social Security Office.			
*NEW SOCIAL SECURITY NAME			
ADDRESS CHANGE			
OLD ADDRESS:			
NEW ADDRESS:			
TELEPHONE:		EMAIL ADDRESS:	
EFFECTIVE DATE:			
SIGNATURE		DAT	 [
Active or Reemployed FRS Retiree Send to: Human Resources Services or FRS Retiree Send to: Office of Retirement Services			
	2700 Judg	ard Public Schools ge Fran Jamieson Way era, FL 32940	
Pension Plan Retirees: Contact the FRS Division of Retirement at 1-844-377-1888 to report Address Change or Name Change.			
Investment Plan Retirees: Contract the FRS Investment Plan Administrator at 1-866-446-9377 to report Address Change or Name Change			
Active Employees: Florida Retirement System (FRS) will not be notified of Address or Name changes for employees not working during the summer break. For example, teachers not working during the summer will have their information updated at FRS in September. If you need to contact FRS during this time make sure to provide them with your address or name before changes were made. For office use only OC: Rtm CC: HR			