

**Irvington Public Schools
Department of Human Resources
1 University Place, Irvington, NJ 07111**

PERSONNEL UPDATE FORM

1. _____
Location and Position *Date of Hire*

2. _____
Last Name *First Name* *Middle Initial*

3. _____
Job Title *Birth Date*

4. _____
Street Address *Apt #*

5. _____
City *State* *Zip Code*

6. _____
Telephone *Cell phone* *Email address*

Signature *Date*

Check the option that applies

- Change of address
- Change of name
- Change of telephone number

Please complete and return this form to the Human Resources department via email, fax (973) 399-2632 and/or regular mail; and to your Principal or Supervisor immediately. Copies must also be sent to the following Departments:

**Payroll
Benefits**

*** Please note – Failure to provide accurate information may result in your missing important notifications from the District**