

BESSEMER CITY SCHOOL SYSTEM

1621 5th Avenue North Bessemer, AL 35020
Telephone: (205)432-3000 Fax: (205) 432-3067

Employee Change of Address Form

Please complete and return to the Department of Human Resources
Please Print Clearly

Date: _____

Employee Name: _____

Social Security: _____

Employee ID#: _____

Current Address: _____

Current Phone #: _____

School/ Dept.: _____ Position/ Title: _____

Employee Signature _____

For Internal Purposes Only; This form is not Reflective of the RSA Change of Address Form