

HUMAN RESOURCES

Employment Actions and Records

Name and Address Changes

This regulation supersedes Regulation 4210.4

I. PURPOSE

To provide procedures to be followed by school system employees to correct or change names, addresses, telephone numbers, and/or Social Security numbers on employment records and instructions for making corresponding changes on Social Security Administration records.

II. SUMMARY OF CHANGES SINCE PUBLICATION

- A. Section V.A. adds city to the list of jurisdictions.
- B. Section V.B. clarifies where paychecks or pay advices are mailed.
- C. Section VI.A.1.b. adds UConnect as a venue for employees to submit an address change.
- D. Section VI.A.3. updates the Office of Payroll Management address.

III. RESPONSIBILITY

Each employee shall be responsible for keeping his or her name, address(es), and telephone number(s) accurate on school system employment records and for keeping Social Security Administration information up to date.

IV. DEFINITIONS

An employee maintains both a main address and a supplemental address, which may be different.

- A. An employee's legal residence is considered an employee's main address. A post office box or work location address is not a valid address for a legal residence.
- B. An employee's supplemental address is the same as the main address unless the employee provides an alternative address. A post office box is valid for a supplemental address. A work location address is not acceptable for a supplemental address.

V. REASONS FOR KEEPING NAME, ADDRESS, TELEPHONE NUMBER, AND SOCIAL SECURITY NUMBER ACCURATE

It is necessary that the name, address(es), telephone number(s), and Social Security number be kept accurate on employment records for the following reasons:

- A. An employee's main address on file is used to determine a valid state, county, city and/or district taxing authority.
- B. The supplemental address on file is used to mail paychecks or pay advices to the employee.
- C. W-2 wage and tax withholding statements are mailed to the supplemental address on file.
- D. Checks and pay advices are sorted in ZIP Code order for delivery, requiring that ZIP Codes be kept current.
- E. Correspondence from the Department of Human Resources is mailed to the supplemental address on file.
- F. Mailings connected with other appropriate school system business-related activities are sent to the supplemental address on file.
- G. An employee's name and Social Security number, used by Fairfax County Public Schools (FCPS) for providing W-2 (wage and tax information) to the Social Security Administration and other taxing authorities, must match the employee's Social Security records to ensure that employee records are correctly credited. An employee may verify the name and Social Security number on file with FCPS via the employee self-service portion of UConnect on the web at <http://www.fcps.edu/DHR/uconnect>.

VI. PROCEDURES

- A. School System Records
 - 1. Methods
 - a. An employee should submit a name change request by completing a Name and Address Change form (FS 73-01).
 - b. An employee can change his or her address via UConnect at <http://www.fcps.edu/DHR/uconnect> or by completing a Name and Address Change form (FS 73-01).
 - c. Employees also may submit changes in writing.

2. Requirements

All change requests must include the employee's signature, employee identification number, or Social Security number.

3. Where to Submit

Change requests must be forwarded to the Department of Financial Services, Office of Payroll Management, 8115 Gatehouse Road, Suite 2200, Falls Church, VA 22042.

4. Deadlines

Change requests for personnel paid monthly must be received in the Office of Payroll Management by the first working day of the month for changes to be effective for that month's payroll. Change requests for personnel paid biweekly must be received ten calendar days prior to a pay date for the change to be effective for that pay date.

B. Social Security Number Card Changes

To change a name and/or Social Security number with FCPS, the employee must contact the Social Security Administration and complete form SS-5, Application for a Social Security Card (original, replacement, or change). The employee must then submit the request for a name and/or Social Security number change to FCPS with either a copy of the receipt from the Social Security Administration or a copy of the new Social Security card.

VII. AVAILABILITY OF FORMS

- A. The Name and Address Change form (FS 73-01) is available at work locations, from the Office of Payroll Management and on the web at <http://www.fcps.edu/fs/payroll/forms/index.htm>.
- B. Form SS-5, Application for a Social Security Card, (original, replacement, or change) is available from the Social Security Administration office.