

W-2/1095-C Change of Address Form

Return this form to your Organization's Human Resource or Payroll Office	Organization: Christina School District		
	Building: Administrative Offices of Christina School District		
	Street Address: 1899 South College Avenue		
	City: Newark	State: DE	Zip: 19702
	Phone: 302-552-5699		

I no longer work for the State of Delaware. Please change my address for W-2 and/or 1095-C mailing purposes.

Employee Signature: _____

Date: _____

Employee Information
Employee Name:
Social Security Number:

Employee Previous Mailing Address		
Street Address:		
City:	State:	Zip:

Employee Current Mailing Address		
Street Address:		
City:	State:	Zip:
Phone number where you can be reached during the day:		

***** Department Use Only *****
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