Wilton-Lyndeborough Cooperative School District School Administrative Unit #63

## **Employee Information Change Form**

Employee Name:	
<u>To change name:</u>	
Previous Name:	
New Name:	
Marital Status: Single □Married □Se	parated Divorced DWidowed
To change address or phone number:	
New address:(mailing; City/State/Zip)	
Phone #: (include area code)	
To change emergency contact:	
Emergency Contact Name:	Relationship:
Emergency Contact Phone Number:	(include area code)
Employee's Signature:	Date:

The Wilton-Lyndeborough Cooperative School District does not discriminate on the basis of race, color, religion, national origin, age, sex, handicap, veteran status, sexual orientation, gender identity or marital status in its administration of educational programs, activities or employment practice.