**Change of Information Form**

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| ***Section A: - Employee Identification*** *(This section MUST be completed)* | | ***Empl Id:*** | |
| **Last Name:** | **First Name** (Primary Name)**:** | | **Middle Initial:** |

**Section B: - Change in Personal Information** (Enter new information in fields where applicable)

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| --- | --- | --- | --- | --- |
| **Last Name:** | | **First Name (Primary name):** | | |
| **First Name (Preferred name** – if different from primary) | | **Middle Name:** | | |
| **Mailing Address:** | | **City:** | | **Province:** |
| **Postal Code:** | **Phone #: Cell #:**  **( ) - ( ) -** | | | |
| **Alternative Email: (different then supplied by college)** | | |  | |
| **Emergency Contact**  **( ) -**  **-** Name of Individual **Phone #** | | | Relationship: | |

**Section C: - Change in Banking Information**

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| Please attach a VOID Cheque in this areaIf you do not have a chequing account, contact your bank for written confirmation of your account information and attach the confirmation to this sheet. *In addition, please be advised the College’s Accounting Department processes employee expense statements by direct deposit; these deposits will be made into your primary payroll bank account****. If you wish your expense payments deposited into a different account, you must contact the Accounting Department directly with your request.*** |

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| **Employee Signature:** | **Date:** |

**SECTION D – Completed by Payroll/HR**

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| **Processed By:** | **Date:** |

The personal information on this form is collected under the authority of the Ontario Colleges of Applied Arts and Technology Act, 2002. In accordance with the *Freedom of Information and Protection of Privacy Act*, it will be used only for the purpose of administering your payroll and other legally authorized administrative purposes within the college.  Information requested regarding payroll may be shared when direct funding is provided by an external agency. If you have questions regarding the collection/use/retention of this information, please contact the Payroll Department at Sir Sandford Fleming College 705-749-5530.