

**NHUHSD  
CHANGE OF INFORMATION**

Name: \_\_\_\_\_

Previous Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_

New Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone # Change: \_\_\_\_\_

**Return to the District Office - Attn: Tammy Pires**

District Office Use Only:

Directory Changed

Payroll/MAGIC Changed

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