

**Central Islip UFSD
50 Wheeler Road
Central Islip, New York 11722**

Business Office/Benefits Department

CHANGE IN STATUS FORM

Please complete all information, attached appropriate documentation, and return a copy to Marta Paniagua, Benefits Department and a copy to the Personnel Office.

Name: _____ Date: _____

Previous Name: _____
(With name change, provide copy of your new Soc. Sec. card)

Address: _____

Phone: _____

Social Security Number: _____

Event: _____
(Provide copy of marriage certificate; first and last page of divorce agreement, copy of birth certificates and social security cards for dependents.)

Date of Event: _____

The Benefits Department may contact you regarding completion of additional documentation for insurance purposes. If you have any questions, please contact Marta Paniagua at 631-348-5000 Ext. 1025.

If this information changes your current W-4 status, you must contact the Payroll Department at Ext. 1030 for a new W-4 form.

Employee's Signature _____