CHANGE OF ADDRESS FORM

Human Resources, Payroll

Return form to **Human Resources Office:**

100 Campus Drive, Weatherford, OK 73096 | HAB 101 | Fax 580.774.6582

Effective Date: _____

Employee Name _____ **SWOSU ID#** _____

Physical Address _____
Address

_____ _____ _____
City ST Zip

Mailing if Different _____
Address

_____ _____ _____
City ST Zip

Phone Number (Home) (_____) _____ - _____

Phone Number (Cell) (_____) _____ - _____

_____
Employee's Signature Date

rev 02/2023