



**Prince George’s County Public Schools
Division of Human Resources
Change of Personal Data Form**

Directions: Please enter your information and send the completed form to HR.DataQuality@pgcps.org, along with the supporting documentation listed below.

Last Name _____ First Name: _____ Middle Initial: _____

EIN: _____ Last 4 of SS#: _____ Email: _____

School/Department Name: _____

Contact Phone Number : _____

- Name Change *
- Address Change
- Other _____
- Effective Date: _____

| Change from (Old) | Change to (New) |
|--------------------------------|--------------------------------|
| First Name | First Name |
| Last Name | Last Name |
| Middle Name | Middle Name |
| Address | Address |
| City | City |
| State Zip | State Zip |
| Phone number | Phone number |

Employee’s Signature: _____ Date: _____

Change of Personal Data Form Support Documentation Requirements

- Address Change - Driver’s License with current/new address
- Name Change (Marriage or Divorce)* - Marriage License or Court Order
- Incorrect Gender or Title - Birth Certificate, Court Order
- Name Misspelled or Date of Birth Error - Birth Certificate or Driver’s License