University of South Alabama Retiree Name/Address Change Form

The following personal data is requested to assist three thinty and Human Resources with notifying you as a USA Retiree of special events and correspondence associated havitblniversity of South Alabama. Information provided on this form is for University business purposes only. Please complete changes in name, home address, e-mail address and/or family salutation below. You may also contact Ms. Ah bleHHU at 460-6133 for further assistance.

| Current Name: | First Name | Middle Name | Last Na | me |
|-----------------------------|----------------------------|---------------------------|-----------|-----|
| Revised Name: | First Name | Middle Name | Last Na | ıme |
| Current Family Salutation:_ | (overnie Mr | 9 Mrs. John Cmith III) | | |
| | (example ivir. | & Mrs. John Smith, III) | | |
| Current Address: | | | | |
| | Home S | Street Address | | |
| _ | City | State | | |
| E-mail addressoftional): | | | | |
| Would you prefer correspon | dence be sent to you | u via e-mail or paper? Ch | neck one: | |
| E-mail (if e-mail, please | provide e-mail a es | s in space provided above | e)Paper | |
| Return completed form to: | | | | |

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