

# Choctaw Enterprises

2101 W Arkansas • Durant, OK 74702  
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## **Name & Address Change Request**

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

Social Security Number: \_\_\_\_\_

### **Address/Phone Number Change Information**

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

New City: \_\_\_\_\_ New State: \_\_\_\_\_ New Zip Code: \_\_\_\_\_

New Phone Number : \_\_\_\_\_

### **Name Change Information**

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

*(Your name will not be changed without a new updated social security card which must accompany this form)*

### **Employee Consent:**

I Hereby Authorize Choctaw Enterprise Human Resources Department to Make the Name and/or Address Changes Above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_