



Town of Plaistow ♦ Human Resources

Employee Demographic Information Change Form

This form is used to update employee information in the Town of Plaistow HR and Payroll databases. It is the employee's responsibility to update their personal information in the HealthTrust, Allegiant Care and/or NH Retirement systems through their portal access or by USPS, if applicable. Other than required fields*, please only provide the information that has changed.

Effective Date*: _____

Employee Name*: _____
Last First MI
(If submitting a Name Change, please provide Name prior to change)

Personal Information:

New Legal Name: _____
Last First MI
(Legal name changes require a government issued identification card or legal name change documentation.)

Marital Status: Single ☐ Married ☐ Please complete updated W4 if filing status has changed.

Gender: Male ☐ Female ☐

Address & Contact Information:

New Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

New Telephone: _____ **Home:** ☐ **Cell:** ☐ **Other:** _____

Email Address: _____

Emergency Contact Information:

Contact Name: _____

Relationship to Employee: _____

Telephone: _____ **Home:** ☐ **Cell:** ☐ **Other:** _____

Employee Signature: _____ **Date:** _____