



### Employee Name Change Form

I, \_\_\_\_\_, hereby authorize Manheim Township to change my name:  
**(Printed Employee Name)**

Previous Name: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_

Date of Name Change: \_\_\_\_\_

Employee Signature \_\_\_\_\_

Date \_\_\_\_\_

#### HR USE ONLY

HR Dept Received \_\_\_\_\_

HR Dept Processed \_\_\_\_\_

Processed By \_\_\_\_\_

iSolved

Benecon (UBF)

UBF sent: \_\_\_\_\_

OneAmerica

Unum

MT email changed

Verified Name Change on SS Card (**required**)