



Gwinnett County Public Schools Employee Address Change Form

Rev 11/18/20

Instructions: Please complete this form and return to Human Resources by following the instructions below.

General Information (Required of everyone)

Please check box if you are a GRS Retiree.

First Name

Last Name

Employee ID (required)

Position

Location

Address and Telephone Changes

Former Address Information:

Street

Apartment Number or PO Box

City

State

Zip

Preferred Telephone Number

New Address Information:

Street

Apartment Number or PO Box

City

State

Zip

Preferred Telephone Number

Employee Signature

Employee Signature (If signing electronically - type first and last name)

Date

If signing electronically: I understand that checking this box constitutes a valid signature (required).

If returning the form electronically:

If returning the paper form, please send via mail or fax to the address / number below:

**Gwinnett County Public Schools
Human Resources / Employee Data Changes
437 Old Peachtree Road NW
Suwanee, GA 30024
Fax (678) 442-5258**