

## PREVIOUS EMPLOYEE - Change of Address Request Release Form

Complete this request form only if you have already separated from DCPS. Documentation showing proof of the new mailing address must be attached to this form. <u>Incomplete applications will not be processed.</u>

Current DCPS employees must change their address via the Employee Self Service website - http://ess.dc.gov

Full Name:

Employee ID #:

Social Security #:
(Last Four #s ONLY)

NEW
Malling Address:

Apt/Suite #:

City, State:

Zip Code:

## **II. SIGNATURE.**

By signing below, I certify that I am the former DCPS employee listed above and the information provided is true and accurate.

Signature	Data	
Signature.	Date.	

## III. PROOF OF NEW ADDRESS.

One copy of documentation that provides proof of new mailing address is required. Acceptable documents include: Drivers License/Non-Drivers Identification, or utility bill with new address and employee's name listed.

IV. EMAIL COMPLETED REQUEST FORM TO DCPS.PSCHANGEREQUEST@K12.DC.GOV