



PREVIOUS EMPLOYEE – Change of Address Request 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. Incomplete applications will not be processed.

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

I. PERSONAL INFORMATION. Print Clearly.

Full Name:		Employee ID #:	
Email Address:		Social Security #: (Last Four #s ONLY)	
NEW Mailing 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:		Date:	
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III. PROOF OF NEW ADDRESS.

Attach copy of documentation that provides proof of new mailing address. Acceptable documents include – Drivers License/ Non-Drivers Identification or utility bill with new address and former employee's name listed.

IV. FAX COMPLETED REQUEST FORM TO 202.442.5315.