New York City Department of Education New "Personal and Tax Data Change Form"

Social Security		Employee ID	
First Name Middle		Last Name	
CHANGES REQUESTED (CHECK ALL THAT APPLY): Name Change Social Security Number Tax NEW NAME (You must submit a copy of your Social Security	x Information	MARITAL STAT If you are an admin changes for these, NYCAPS Employe	update your ADDRESS , PHONE , TUS , call HR Connect at 718-935-4000 employee, teacher, or F-Status you can mal as well as your NAME , using our see Self Service. Visit www.nyc.gov/ess act and biographical information.
New First New Middle	,	New Last	
SOCIAL SECURITY NUMBER (You must submit a copy of	f your signed Social Security car	′	ΓΑΝΤ: Please select your title:
Incorrect Social Security Number Correct Social Security Number			DOE employee Vendor
CORRECT DATE OF BIRTH:		_	Custodian
DOB			
MM DD YYYY			
I certify that I have personally completed this application, and everything I have true and complete. I recognize my personal responsibility to notify my payroll secr	,	•	Only
Signature/Date:	can't and other parties of changes submittee	Data Entere	·

Note: Please retain copies of all documentation that you submit to the Department of Education.

New York City Department of Education Personal and Tax Data Change Form

<u>Instructions for Completing the DOE Personal and Tax Data Change Form</u>

For All DOE Employees

Replaces the OP-85 Form

You may request a change to your following personal and/or tax data by completing the attached form: name, Social Security number, date of birth, tax status, tax allowances, and/or additional withholding amount.

This form must be completed and signed by you in order for the requested data changes to be processed. For name, Social Security number, date of birth and tax information changes you must submit appropriate supporting documentation required by the DOE (see chart below for examples. documents must be originals). **Login to NYCAPS ESS** (<u>nyc.gov/ess</u>) if you want to update your **ADDRESS**, **HOME PHONE**, or **MARITAL STATUS**.

- 1. Use a black or blue pen and print clearly in the boxes provided on the form.
- 2. At the top of the form, fill in your Social Security Number (or employee ID), first, middle and last name.
- 3. In the Changes Requested section, select the type of change(s) you are requesting.
- 4. Only complete the sections corresponding to the changes you are requesting.
- 5. After reviewing the information you have entered, sign and date the bottom of the form where indicated.
- 6. Make a copy of the completed form for your records.
- 7. Upload this form and **COPIES** or **ORIGINALS** if indicated below of all applicable supporting documentation to the HR Connect portal (see information below).
- 8. It is your personal responsibility to notify your payroll secretary if you change your name, address, phone number, and/or tax information.

<u>Submit this form</u>: Please submit this form through the Upload Document feature of the **HR Connect Portal** at https://doehrconnect.custhelp.com. If you are a DOE employee, you will need to log in with your DOE username and password. Non-employees must create an account.

Type of Change	Employees must attach a COPY of at least one of the following documents with the original form.
Name change	Social Security card
Social Security Number	Social Security card and a letter from Social Security Administration
Federal Tax allowances, tax status and/or additional withholding amount	Federal W-4 form (and the original Withholding Certificate of Affirmation if there are more than 10 allowances)
State Tax allowances, tax status and/or additional withholding amount	State IT2104 form (and the original Withholding Certificate of Affirmation if there are more than 14 allowances)
Date of birth	Birth certificate; or Government-issued ID, such as a driver's license or passport
Address, Home Phone, Marital Status	Login to NYCAPS ESS (<u>nyc.gov/ess</u>) or call HR Connect at 718-935-4000. No documentation necessary.

IMPORTANT: If you need to submit original documentation, you cannot fax your request.