

Human Resources Internal Operating Procedures

Procedure 6.M: Name Change Procedure Volume 6 Managing Office: Office of Human Resources Effective Date: February 24, 2016

I. Purpose

This procedure will document the process and guidelines to change employee's name in Banner Human Resources/Payroll System, update taxes, and update benefits checklist.

II. Name Change Procedure for faculty and staff

Alabama A&M University employees who wish to change their name in the Banner Human Resources /Payroll system must first go to the local Social Security Administration office (SSA) to officially change their name. Once the SSA makes the change, the employee will be given a receipt confirming the name change. The employee should receive the official social security card reflecting the name change in the mail in a few weeks. Once the employee receives the official social security card, the employee should visit the Office of Human Resources and request that her/his name be changed in Banner Human Resources/Payroll system.

The name change will be reflected immediately in Banner Human Resources/Payroll system after the Office of Human Resources receives the official documentation – Name Change Form and new Social Security Card.

Huntsville SSA Office Contact Information:

4970 Research Drive, NW Huntsville, AL 35805 P: 1-866-593-0665 TTY: 1-256-837-8803 Hours of operation: Monday, Tuesday, Thursday, and Friday 9:00 a.m. – 4:00 p.m. Wednesday 9:00 a.m. to 12:00 p.m. Additional information from the SSA regarding name change can be found at: https://faq.ssa.gov/ics/support/kbanswer.asp?QuestionID=3749

III. Name Change Process for students

Students must contact the Office of the Registrar to make the necessary name change in the Banner Student system. For more information regarding changing a name in the Banner Student system, please contact the Office of the Registrar at 256-372-5254 or go to:

http://www.aamu.edu/administrativeoffices/registrar/Documents/chg_name_ssn%202015.pdf

Alabama Agricultural and Mechanical University Office of Human Resources

Mailing Address: Human Resources, Alabama A&M University, Normal, AL 35762Phone: 256.372.5835Fax: 256.372.5881

Name Change Form

The employee will need to bring the following documents to the Office of Human Resources:

- The new Social Security Card that reflects the name change.
- This name change form.

Date:	Banner ID#:		
Current Name of employee: F	First Name	Middle Name	Last Name
Requested to be changed to:	First Name	Middle Name	Last Name
Note: If address and phone r (SSB) to change address and	_	nployee should log into	Self-Service Banner
Signature of Employee			Date
		Human Resources	
Name of HR staff received form (Please print):			
Date HR staff reviewed the soc	ial security card:		
Date HR staff updated Form I-9	9:		
Date HR staff updated name or	the employee's pers	onnel and benefits file fold	der:

Name Change Benefit Information Checklist

After changing your name, the below items may apply to you.

- 1. _____The employee may wish to change his/her email address. If so, send an email to Ted Stewart in Information Technology System indicating the current name and the new name for the email address.
- 2. <u>The employee may wish to change his/her federal and state tax status in cases where the marriage status changed. The employee should complete a new form A-4 for Alabama tax withholding and a new form W-4 for federal withholding. The forms are located on the Office of Human Resources website and in the Office of Human Resources. After completing the form, submit the tax form(s) to the Payroll Department, Patton Hall, room 105.</u>
- 3. _____ The employee may wish to change his/her beneficiary information. To change the beneficiary information for the life insurance, the <u>Guardian Beneficiary Designation Change</u> (<u>GG-17</u>) form should be completed. The file is located in the Office of Human Resources or at <u>https://www.guardianlife.com/sites/default/files/gg-17beneficiarychangeform.pdf</u>
- To change the beneficiary information for the Teachers' Retirement System, the <u>Change of Beneficiary (RSA Form 100C)</u> form should be completed. The file is located in the Office of Human Resources or at <u>http://www.rsa-al.gov/uploads/files/RSA_100-</u> <u>C Change of Beneficiary.pdf</u>
- 5. _____ If the employee has a voluntary retirement plan (TIAA-CREF, LSW, VALIC or ASPRIE), the employee should contact Mr. Wilbert Hamilton at 256.541.4565 for name change and if applicable change beneficiary information.
- 6. _____To change the name with Teachers' Retirement System of Alabama and PEEHIP health insurance, the employee must provide a copy of his/her social security card to TRS and PEEHIP. The change will automatically transmit to Blue Cross Blue Shield of Alabama and member will receive a new insurance card. Mail the documents to TRS, P.O. Box 302150, Montgomery, AL 36130-2150.
- 7. _____To change the name with Guardian and Aflac, the _<u>Guardian Enrollment Application</u> and AFLAC Request for Name Change (Form H-L0046.12A) ____form should be completed. The form is located at <u>https://www.aflac.com/docs/employers/change-forms/aflac-name-change-form.pdf</u>
- 8. _____To change the beneficiary with Aflac, the _<u>**Request for Beneficiary Change (Form H-</u></u> <u>L0046.12C)**__form should be completed. The form is located at <u>https://www.aflac.com/docs/employers/change-forms/aflac-beneficiary-change-form.pdf</u></u></u>