



Employee Personal Information Update Form

Personal Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* *State* *ZIP Code*

Home Phone: _____ Alternate Phone: _____

Email: _____

Employee ID: _____

Emergency Contact Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* *State* *ZIP Code*

Primary Phone: _____ Alternate Phone: _____

Relationship: _____

It is the responsibility of the employee to notify the Human Resource department when contact information changes or a new emergency contact is selected. The City of Pineville strives to ensure the protection of the employee's personal information through responsible practices, policies and as required by law. Personal information is used to appropriately process requests associated with employment and benefits through the City of Pineville. Under no circumstances does the City of Pineville share personal information with other individuals or organizations without the employee's permission, except when applicable by law.

Employee Signature

Date of Request