



**Office of General Services  
Business Services Center**

Human Resources, BSC Records Management  
 Building 5, Floor 4  
 W. Averell Harriman State Office Campus  
 1220 Washington Avenue  
 Albany, NY 12226-1900  
 Email: [BSCPersonnelAdmin@ogs.ny.gov](mailto:BSCPersonnelAdmin@ogs.ny.gov)  
 Website: [bsc.ogs.ny.gov](http://bsc.ogs.ny.gov)  
 Phone: 518-457-4272 | Fax: 518-457-1879

# Personal Data Change Form

**Instructions:** Submit your completed, hand-signed form along with documentation for processing to the BSC Records Management team at [BSCPersonnelAdmin@ogs.ny.gov](mailto:BSCPersonnelAdmin@ogs.ny.gov), or by fax to 518-457-1879, or by regular mail using the address above.

The changes requested on this form apply to the following: <i>(check all that apply)</i>		Name Change	Address Change	Email Change	Phone Change	
<b>EMPLOYEE</b>						
Last Name	First Name	MI	Agency	Last 4 of SS# or Full NYS Empl ID		
<b>NAME CHANGE</b>						
<b>Documentation:</b> Please check the box or boxes below to indicate the documentation you are submitting with this form. You must submit a copy of <u>one</u> type of documentation or your request cannot be processed.						
Social Security Card		Valid Driver's License	Passport	Marriage Certificate*	Divorce Decree*	Court Order
<small>*If you are changing your name due to marriage or divorce, and you would like to add or remove a spouse or dependent from your health insurance plan, you must complete and submit a <a href="#">Health Insurance Transaction Form</a> (PS-404)</small>						
Former Last Name		Former First Name		MI		
New Last Name		New First Name		MI		
<b>ADDRESS CHANGE</b>						
New Resident Address <small>(Please provide residence address - a P.O. Box is not acceptable.)</small>				Apt. #		
City	State	Zip Code	County			
Mailing Address <small>(If different from above - a P.O. Box may be used.)</small>				Apt. #		
City	State	Zip Code	County			
Paycheck Mailing Address <small>(If different from above - a P.O. Box may be used.)</small>				Apt. #		
City	State	Zip Code	County			
<b>EMAIL CHANGE</b>						
Former Email Address			New Email Address			
<b>PHONE CHANGE</b>						
Former Home Phone			New Home Phone			
Former Cell Phone			New Cell Phone			

**AUTHORIZATION:** My signature below authorizes the Business Services Center to make the appropriate changes to my employee data as noted on this form.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PLEASE NOTE:** The BSC staff will update your personnel records including your paycheck and health insurance records. In addition, there are several employment-related organizations which you must contact directly to advise of this change. See below for a list of such organizations. If applicable, please also follow your agency's procedures for reporting personal information changes.

Additional agencies and organizations to notify of your personal information change. Please contact each organization that applies to you.

**Social Security Administration**

1-800-772-1213

<https://www.saa.gov>

Federal and state laws require Social Security earnings to be reported under the correct name and Social Security Number.

**NYPERL**

(New York Public Employee and Retiree Long-Term Insurance Plan)

1-866-474-5824

<https://www.cs.ny.gov/otherben/nyperl/nyperl.cfm>

**State Employees Federal Credit Union (SEFCU)**

518-452-8183

1-800-727-3328

<https://www.sefcu.com/>

**CSEA**

1-800-323-2732

<https://cseany.org/>

**PEF**

1-800-342-4306

<http://www.pef.org/>

NYS Public Employees Federation

P.O. Box 12414

Albany, NY 12212

**MC Life Insurance**

518-473-3496

<https://www.cs.ny.gov/>

**It is suggested that employees complete Tax Form IT-2014 when moving in or out of New York City.**

Link to: [Withholding Tax Forms](#)

<https://www.tax.ny.gov/>

518-457-5181

**NYS Retirement System**

518-474-7736 (local)

1-866-805-0990 (toll-free)

<http://www.osc.state.ny.us/retire/>

Must be notified in writing. Forms are available online.

**New York's College Savings Program**

1-877-697-2837

<https://www.nysaves.org/>

**NYS-Ride**

1-866-428-7781

<http://www.nysride.com>

**Savings Bonds**

1-800-426-9314

<http://www.treasurydirect.gov/>

**NYS Department of Civil Service**

If you are on any eligible Civil Service lists, you must notify Civil Service in writing.

NYS Department of Civil Service

Staffing Support Unit

Albany, NY 12239

Or call the Eligible List Information Line for further information:

518-457-4295

<https://www.cs.ny.gov/elmspublic/faq.cfm>

**Flex Spending Account**

(HCSA) Health Care Spending Account

(DCAA) Dependent Care Advantage Account

1-800-358-7202

<http://flexspend.ny.gov/>

**FOR NAME CHANGES ONLY:**

If you have a SFS user account, you must email [BSCSecurity@ogs.ny.gov](mailto:BSCSecurity@ogs.ny.gov) to request that your SFS username be updated.