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Employee Address Change Information

All HR Partners Staffing, LLC (HRPS) employees are responsible for providing current mailing information and with updating this information as needed. Please complete the following if changes are necessary.

Name: _____
Last First Middle

Last 4 digits of Social Security #: _____

New Address:

Name:	
Address	
Phone #	
Cell Phone#	
Shift/Position Preference	

Previous Address:

Name:	
Address	
Phone #	
Cell Phone#	

Employee's Signature: _____

Date: _____

Or if information is taken by phone call:

Staffing Agency Employee's Name: _____

Date & Time of Call: _____