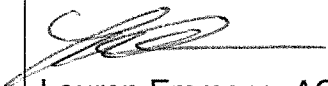


CHAPTER Human Resources	CHAPTER 05	SECTION 001	SUBJECT 30
SECTION Personnel		DESCRIPTION Change of Name, Address and Phone Number	
WRITTEN BY Jackalyn Anderson, B.B.A	REVISED BY Lisa Ruddy, CHES QI Coordinator	AUTHORIZED BY  Lauren Emmons, ACSW CEO	

APPLICATION:

<input checked="" type="checkbox"/> CMH Staff	<input type="checkbox"/> Board Members	<input type="checkbox"/> Provider Network	<input type="checkbox"/> Employment Services Providers
<input type="checkbox"/> Employment Services Provider Agencies	<input type="checkbox"/> Independent Contractors	<input type="checkbox"/> Students	<input type="checkbox"/> Interns
<input type="checkbox"/> Volunteers	<input type="checkbox"/> Persons Served		

POLICY:

Lapeer County Community Mental Health (LCCMH) employees will keep the Human Resources (HR) Department advised of their current name, address and phone number.

PROCEDURE:

- A. Any LCCMH employee changing their name, address or phone number is required to complete LCCMH Form #198 "Staff Change of Address Name Notification" and submit it to the HR Department within one week of the change.
 - 1. The HR Department will send the form to the appropriate person for recording changes.
 - 2. When completed, the HR Department will file the form in the employee's personnel file.

- B. Employees are responsible for notifying their health insurance carriers, Municipal Employees Retirement System (MERS), and any other deferred compensation plan to which they subscribe of any change of name, address, or phone number.

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AM:lr

This policy supersedes
#01/94002 dated 01/07/1994.
