

EMPLOYEE CHANGE OF ADDRESS REQUEST

It is recommended you change or update your home address directly on-line via your secure Upstate Medical University Self-Serve account under "My Information/Employee Details/Personal Profile"

OR

You may complete the following and forward to EITHER the Payroll Services or Human Resources office at:

- Payroll Services, 1st Floor, Jacobsen Hall
- Human Resources-Benefits Office at benefits@upstate.edu or fax: 315-464-4390

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|------------------------|---------------|-----------------------|-----------|----------|---------------|-------|
| NAME: | | | | | | |
| imployee state ID#: | | | | Last 4 D | igits of SSN: | |
| | | ٨ | lew Addre | ess | | |
| Street: | | | | | | |
| ot./Suite: | | | | | | |
| City | | | State: | | Zip Code: | |
| Phone #: | ☐ No Change (|) - | 1 | 1 | | |
| L | | | | | | |
| | | | | | DAY | /TIME |
| SIGNAT | URE: | | DATE: | | PHONE#: | |

OTHERS YOU NEED TO CONTACT RE: YOUR CHANGE IN HOME ADDRESS

Thank you for submitting your home address change. The offices of Payroll Services and Human Resources will update your payroll record and applicable NYS health insurance records primarily based on your entering any changes on your Upstate self-serve account (see Personal Profile) or via the completion of this Address Change Request form. Please also advise the HR Benefits office of any change in marital status (i.e. divorce) or covered dependents as it relates to health insurance at benefits@upstat.edu.

PLEASE NOTE: You are responsible for personally contacting any of the below agencies with whom you do business, or have certain benefits with since record updates (i.e. beneficiaries) must be done via your personal secure log-in or the agencies identity verification practice.

Use this checklist to ensure you have notified all applicable agencies as needed of your change in home address.

----- Your Employment Affiliation ------

| CSEA | PEF | UUP | M/C | ALES (UPOs) | RF | AGENCIES | DONE |
|------|-----|--------------|--------------|----------------|--------------|---|------|
| | | | | | | Dental/Vision insurance: | |
| | | \checkmark | | | | ☐ CSEA Benefit Trust Fund at 1-800-323-2732 | |
| | | | | | | ☐ UUP Benefit Trust Fund at 1-800-887-3863 | |
| | | | | | | Retirement/Pension plan: | |
| √ | √ | √ | \checkmark | √ | | ☐ NYS Employees Retirement System (ERS) at 1-866- 805-0990 or | |
| , | , | | , | | | http://www.osc.state.ny.us/retire/forms/index.php | |
| √ | √ | \checkmark | √ | | | OR CG Retirement Plan (BPAS) at 1-866-221-8780 | |
| | | | | | | OR | |
| | | Or | Or | | | SUNY Optional Retirement Plan (ORP) ☐ TIAA 1-866-662-7945 or www.tiaa.org/suny | |
| | | One of | One of | | | □ Voya 1-800-584-6001 or | |
| | | the | the | | | | |
| | | ORP | ORP | | | https://suny.beready2retire.com/ | |
| | | vendors | vendors | | | Fidelity 1-800-343-0860 or www.fidelity.com | |
| | | | Vendors | | | ☐ Corebridge 1-800-448-2542 or <u>www.VALIC.com/suny</u> | |
| | | | | | \checkmark | ☐ <u>RF Basic Retirement Plan</u> TIAA 1-800-842-2252 or | |
| | | | | | | www.tiaa.org/suny Tax Deferred or Supplemental Retirement Annuity | |
| , | , | 1 | 1 | , | | (TDA/SRA) - contact your selected investment provider: | |
| √ | √ | ٧ | ٧ | ٧ | | | |
| | | | | | \checkmark | ☐ TIAA (RF ees)1-800-842-2252 or (NYS ees) 1-866-662- | |
| | | | | | | 7945 <u>www.tiaa.org/suny</u> | |
| | | | | | | □ Voya 1-800-584-6001 or | |
| | | | | | | https://suny.beready2retire.com/ | |
| | | | | | | ☐ Corebridge 1-800-448-2542 or www.VALIC.com/suny | |
| | | | | | | ☐ NYS Deferred Comp Plan 1-800-422-8463 or | |
| | | | | | | www.nysdcp.com | |
| | | | | | | ☐ Fidelity 1-800-343-0860 or www.fidelity.com | |
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