Name/Address Change Form



PAGE 1 of 1 **FAX COMPLETED FORMS TO: 714.258.4051** Submission of this form effectively updates the address and/or name on record for your SchoolsFirst FCU/Nationwide Retirement Builder Plan only. Note: Please allow 5 business days for updates to your account to reflect on www.nationwide.com. 1 Participant Information First Name Last Name Social Security Number (REQUIRED) Phone # School District Email Address **2** Address Update Previous Mailing Address City State Zip Code New Mailing Address Zip Code City State Physical Address (Required if changing mailing address to P.O. Box) City Zip Code State Email Address Phone Number Name Change Include documentation of name change. (i.e. Driver's License, Marriage Certificate, divorce decree or court order) Current Name New Name Documentation provided as evidence of name change Signatures I certify that I am the proper party to authorize and make updates to the above information. I have provided the proper documentation and I authorize SchoolsFirst FCU to make the necessary updates to my Nationwide Retirement Builder Plan. Note: This form will not update your SchoolsFirst FCU Membership(s). Participant Signature (REQUIRED) Date BOX BELOW TO BE COMPLETED BY THE CUSTODIAN. Custodian Approval Date

(08/2017)