THE GEORGE WASHINGTON UNIVERSITY
Payroll Services
45155 Research Place
Suite 155
Ashburn, VA 20147

INACTIVE EMPLOYEE CHANGE OF ADDRESS FORM

Please print

Please update my address for the mailing of my form W2

Name _____

Social Security Number _____

Current Mailing Address _____

_____

_____

Signature_____ Date_____

(Mail this form to the address above or fax to 571-553-4406.)

Only inactive employees should use this form. Active employees should complete a new form W4.