

FEDERAL EDUCATION ASSOCIATION MEMBERSHIP CHANGE OF ADDRESS FORM

(This form is to be used for mailing address, personal email, name and/or telephone number changes **ONLY**.)

Name _____
(Last – First – Middle Initial – as listed on membership record)

Name Change (if applicable) _____
(Last – First – Middle Initial)

Last four digits of SSN (for verification purposes only) _____

Type of Change:

___ Retirement ___ Resignation ___ Transfer
___ LWOP ___ Other: _____

Date of Change: _____

Current School _____

District _____

New School _____

District _____

New Address (if available) _____

Temporary Address (if applicable) _____

Phone Number _____
(PLEASE INCLUDE COUNTRY CODE/AREA CODE)

Personal Email address _____
(PERSONAL (NON DODEA) EMAIL ADDRESS ONLY – Government email address NOT acceptable)

RETURN COMPLETED FORM TO FEA
ATTN: Nereyda Jones-Luciano
1201 16TH STREET NW, SUITE 117, WASHINGTON, DC 20036
Or e-mail to: njones@nea.org
Or fax it to: 202-822-7867