


POLICY 411.0	EMPLOYEE PERSONNEL INFORMATION	
	REVISED: 12/99, 2/03, 06/13, 09/19, 08/22	RELATED POLICIES:
	CFA STANDARDS:	REVIEWED: AS NEEDED

A. PURPOSE

To provide guidelines for Department employees to ensure that their personal information is both accurate and current, which will provide for greater accountability and facilitate a more orderly flow of information among the various City departments.

B. POLICY

It is the policy of the Fort Lauderdale Police Department that upon the change of any employee's familial status (i.e. name/address, marriage, divorce, birth of children, beneficiary, etc.), a revision shall be made through our Department's Payroll/Personnel Office. Such fiduciary interests are of vital interest to both the City and the employee, and it is incumbent upon the employee to ensure this information is updated on a regular basis.

C. PROCEDURE

1. Department employees shall notify the Department's Payroll/Personnel Office within ten (10) days of the change of any of the employee's familial status. These revisions may include, but are not limited to:
 - a. Insurance beneficiaries (medical/dental insurance or life insurance)
 - b. Pension benefits
 - c. Deferred compensation benefits
2. Employees must submit a "Change of Personal Information/Emergency Notification Form", located in the Department Templates, within 72 hours of the effective date of any changes of name, address, telephone number, cell phone number, or a change in emergency notification information. This form must be filled out in its entirety.

The Change of Personal Information/Emergency Notification Form shall NOT be re-submitted to Payroll/Personnel on an annual basis, such as following shift change, unless there are actual changes in the information.

3. Once filled out electronically, the "Change of Personal Information/Emergency Notification Form" must be forwarded via e-mail to the Emergency Information Distribution List in Outlook. The distribution list contains the names of the personnel that need to be notified of personal information changes. It is not necessary to copy anyone else individually.

4. It is the responsibility of the employee to send the “Change of Personal Information/Emergency Notification Form” personally.
5. For those changes beyond the scope of the Department’s Payroll/Personnel Office, employees are directed to contact any of the following offices:
 - a. Risk Management Department or the Fraternal Order of Police for benefit changes involving medical/dental coverage, COBRA coverage, term life insurance and workers compensation issues, including initial injuries and on-going medical care;
 - b. City Personnel Office, Accidental On-the-job Death Beneficiary designations, and any changes requiring legal documentation;
 - c. Appropriate Pension Board, for review of marital status, children, designated beneficiaries, and service and non-service incurred death information;
 - d. Deferred-Compensation: Nationwide and ICMA, for designated beneficiary revisions.
6. Employees should be aware that the aforementioned entities are to serve as a general guide, and should not be considered all-inclusive. Any applicable updates to this policy will be made as necessary.