SEMINOLE COUNTY PUBLIC SCHOOLS

Department of Human Resources
400 East Lake Mary Boulevard
Sanford, FL 32773-7127
(407) 320-0000, FAX 320-0284, TDD 320-0290

FORM W-2 REPLACEMENT REQUEST

W-2s are reissued the 2nd Wednesday of each month and mailed to the address indicated on this form.
Pickups or faxes are not allowed.

Full Legal Name _____ **Phone Number (____)**_____
LAST FIRST MIDDLE (REQUIRED)

Employee ID # _____ **OR** **Social Security Number** _____/_____/_____

***** What year(s) do you want reissued? _____

☐ Mail to address listed on requested W-2?

OR

☐ Mail to address listed below? (Please print.)

_____

_____

_____

_____ _____

SIGNATURE **DATE**

Fax request form to the SCPS Payroll Department @ (407) 320-0284
OR
Mail request form to Seminole County Public Schools/Payroll
400 East Lake Mary Boulevard
Sanford, FL 32773-7127

****Please note: Only the current year and the four (4) prior years are maintained.***