



**Human Resources**  
 TEXAS CHRISTIAN UNIVERSITY  
 TCU Box 298200  
 Fort Worth, TX 76129

## Mailing Label Request Form

Complete the following form to request a mailing label file for departmental mailings.  
 Please fax completed form to 817-257-5053.

### Address

Select one employee address type to be included on the mailing label file.

- Home Address
- TCU PO Box

### Employee Groups

Select the employee group(s) to be included on the mailing label file.

- |  |   |
|--|---|
| <input type="checkbox"/> Faculty<br><i>(All Regular Faculty)</i>                   | <input type="checkbox"/> Label All<br><i>(All Regular Faculty/Exempt &amp; Nonexempt Staff)</i> |
| <input type="checkbox"/> Adjunct Faculty   | <input type="checkbox"/> Budget Managers<br><i>(All Department Budget Managers)</i>             |
| <input type="checkbox"/> Exempt Staff<br><i>(All Regular Exempt Staff)</i>         | <input type="checkbox"/> Retirees   |
| <input type="checkbox"/> Non-exempt Staff<br><i>(All Regular Non-exempt Staff)</i> | <input type="checkbox"/> Special Request*   |

**\*For Special Request, please contact Marilyn Porter at extension 6305.**

### Where to send label request

- Mailing Services
- To Department\*\*

### File Type

*Complete only if selecting department delivery.*

- Comma Delimited
- Excel

**\*\*When selecting department delivery of label list, please complete File Type section.**

What will the labels be used for?

Requested By: \_\_\_\_\_

Phone: \_\_\_\_\_