

# Change of Name or Address

Change your name, permanent, billing, and/or local address.

(Former) Name: \_\_\_\_\_  
Last First Middle

Student ID Number: \_\_\_\_\_

Please Change My: Name  
Permanent Address  
Local Address  
Billing Address

## Name Change

My New Name is: \_\_\_\_\_  
Last First Middle

Spouse's Name: \_\_\_\_\_  
Last First Middle

*If the name change is due to marriage, documentation in support of this form is not required.  
Otherwise, a copy of the court order legalizing the change should accompany this form.*

## Permanent Address

Former Address: \_\_\_\_\_  
Street Phone Number

New Address: \_\_\_\_\_  
City State Zip/Postal Code

\_\_\_\_\_  
Street Phone Number  
\_\_\_\_\_  
City State Zip/Postal Code

Seniors: If you have applied to graduate, will this change affect your address on the Application for Degree? Yes No

## Local Address

Former Address: \_\_\_\_\_  
Street Phone Number

New Address: \_\_\_\_\_  
City State Zip/Postal Code

\_\_\_\_\_  
Street Phone Number  
\_\_\_\_\_  
City State Zip/Postal Code

## Billing Address

Former Address: \_\_\_\_\_  
Street Phone Number

New Address: \_\_\_\_\_  
City State Zip/Postal Code

\_\_\_\_\_  
Street Phone Number  
\_\_\_\_\_  
City State Zip/Postal Code

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Effective Date: \_\_\_\_\_