



# Student Change-of-Address Form

Please return this completed form in person to a staff member of the Office of the Registrar, AA101. Any form that is left in the office without consulting with a staff member will not be processed.

Student Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Effective Date of Change \_\_\_\_/\_\_\_\_/\_\_\_\_

**Before you complete this form, please read the following important information:**

**If you are changing your state of legal residence this may affect your tuition bill. Please discuss this with the staff member in the Registrar's Office.**

**Permanent Address:** This is your home address. Do not use this as a forwarding address for the summer or for billing purposes if billing address is different from your home address. If your mailing address is a P.O. Box, you must also include a location address.

**Billing Address (for tuition bills):** If you want your tuition bill mailed to an address other than your permanent address, please provide a billing address.

**Local Address (if different from home address):** All commuter students must provide a local address and phone number for emergency purposes.

**Permanent Address:** (you must include location address if mailing address is a P. O. Box)

\_\_\_\_\_  
\_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone Number (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

**Billing Address**

\_\_\_\_\_  
\_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone Number (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

**Local Address**

\_\_\_\_\_  
\_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone Number (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

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