



Change of Name / Address Form

Date: _____ **ID #:** _____

Name: _____
(Please Print)

Name Change:

Documentation: **Misspelling** **Marriage Certificate** **Divorce Decree**
(Please Circle One) **Court Order**

Name Change: _____
(Please Print)

Address Change:

Street: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone Number: _____ **e-mail:** _____
(Optional)

Student's Signature

Copies to: Registrar and Financial Assistance and Planning