CHANGE OF ADDRESS FORM

In order to contact you when necessary, the University needs accurate address information. Please make any necessary corrections in the proper block(s) below. Thank you for your cooperation in helping us update our files.

We require any requests for change of address in writing for security reasons.

LOCAL (CM) Where you will be living during the semester; Granite Square Station mailboxes must be changed at MUB Mail Center, Residence hall changes must be made at Housing located in Pettee House)

STREET: ____________________________  LOCAL TELEPHONE: ______-______-______
CITY:_________   STATE:_______ ZIP:______  - ______

PERMANENT (PM) Where you will live when not in school; grades and bills are sent here

STREET: ____________________________  PERMANENT TELEPHONE: ______-______-______
CITY:_________   STATE:_______ ZIP:______  - ______

PARENT 1 (P1) Where newsletters, general information, etc. are sent

STREET: ____________________________  PARENT 1 TELEPHONE: ______-______-______
CITY:_________   STATE:_______ ZIP:______  - ______

PARENT 2 (P2) (Where newsletters, general information, etc. are sent)

STREET: ____________________________  PARENT 2 TELEPHONE: ______-______-______
CITY:_________   STATE:_______ ZIP:______  - ______

______________________________
Student’s Signature