

**OFFICIAL STUDENT CHANGE OF ADDRESS FORM  
HOME MAILING ADDRESS ONLY FORM**

**ID#** \_\_\_\_\_

**LAST NAME** \_\_\_\_\_

**FIRST NAME** \_\_\_\_\_

**MI** \_\_\_\_\_

**OLD ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_

**STATE** \_\_\_\_\_

**ZIP** \_\_\_\_\_

**NEW ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_

**STATE** \_\_\_\_\_

**ZIP** \_\_\_\_\_

**SIGNATURE REQUIRED** \_\_\_\_\_

**DATE REQUIRED** \_\_\_\_\_