



Change of Name, Address, Phone, Email or Term

CHANGE OF NAME, ADDRESS, PHONE, EMAIL OR TERM

CHECK CHANGE REQUEST NAME CHANGE ADDRESS CHANGE PHONE NUMBER CHANGE

Student ID: _____ Date Requested: _____ / _____ / _____ (MM/DD/YYYY)

Last Name _____ First Name _____ MI. _____

Student Signature _____ Today's Date: _____

NAME CHANGE – TWO FORMS OF DOCUMENTATION ARE NEEDED

(Legal documentations must be provided before records are charged) – Check submitted documents

- MARRIAGE LICENSE BIRTH CERTIFICATE
 DIVORCE DECREEED COURT ORDERED NAME CHANGE
 SOCIAL SECURITY CARD (Required)

CURRENT NAME (print only)		
LAST:	FIRST:	MIDDLE"
NEW NAME(print only)		
LAST:	FIRST:	MIDDLE"

ADDRESS CHANGE

- MAILING ADDRESS (MA) EMERGENCY /PARENT ADDRESS
 PERMANENT ADDRESS (PR) GRADUATE (ALUMNI)

CURRENT	
STREET LINE 1	
STREET LINE 2	
CITY AND STATE	
ZIP / POSTAL CODE	
NEW ADDRESS	
STREET LINE 1	
STREET LINE 2	
CITY AND STATE	
ZIP / POSTAL CODE	

PHONE NUMBER CHANGE

CURRENT PHONE TYPE	AREA CODE	PHONE NUMBER
HOME (MA)		
PERMANENT (PR/EM)		
CELL /MOBILE (SMS)		
NEW PHONE TYPE	AREA CODE	PHONE NUMBER
HOME (MA)		
PERMANENT (PR/EM)		
CELL/MOBILE (SMS)		

EMAIL UPDATE OR CHANGE

PERSONAL EMAIL (EMPE)		
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TERM CHANGE REQUEST

CURRENT TERM	FALL2019	NEW TERM	SPR2020
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