

Personnel and Payroll Services  
Student Change of Address/ Change of Name Form

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|-----------|------------|-------------|
| Last Name | First Name | Middle Name |
|-----------|------------|-------------|

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**\*Former Last Name** (If changing your name supporting legal documentation required)

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**New Address**

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|      |       |          |              |
|------|-------|----------|--------------|
| City | State | Zip Code | Phone Number |
|------|-------|----------|--------------|

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|                        |                         |            |
|------------------------|-------------------------|------------|
| *Department (required) | *Social Security Number | (required) |
|------------------------|-------------------------|------------|

- I authorize this change of address to be used for the following type(s) of address(es):
- Mailing Address** (Address printed on paychecks, correspondence mailed, and W2's will go to this address)
  - Permanent Address** (address used for Permanent Record)

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Signature

Date