



Office of Academic Records  
and Summer School  
Slippery Rock, PA 16057

**CHANGE OF ADDRESS AND PHONE NUMBER FORM**

*(Name changes are processed using a different form.)*

**NAME:**  
MR.  
MS.  
MRS. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Last First Middle Soc. Sec. No. or ID

WHEN DO YOU WANT TO HAVE THIS ADDRESS/PHONE NO. CHANGE MADE EFFECTIVE? \_\_\_\_\_

**NEW HOME ADDRESS & PHONE NUMBER**

NEW STREET \_\_\_\_\_ APT. \_\_\_\_\_ NEW CITY, STATE \_\_\_\_\_

NEW ZIP CODE \_\_\_\_\_ NEW PHONE NO. \_\_\_\_\_ NEW COUNTY \_\_\_\_\_

HOME E-MAIL \_\_\_\_\_

**NEW UNIVERSITY/OFF-CAMPUS ADDRESS & PHONE NUMBER**

NEW STREET \_\_\_\_\_ APT. \_\_\_\_\_ NEW CITY, STATE \_\_\_\_\_

NEW ZIP CODE \_\_\_\_\_ NEW PHONE NO. \_\_\_\_\_

STUDENT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**RETURN TO:** OFFICE OF ACADEMIC RECORDS AND SUMMER SCHOOL  
ROOM 107, OLD MAIN

#1226-2/06



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