

Student Number	Last Name	First Name	Middle Name	Mailbox
Date	E-Mail Address		<input type="checkbox"/> Home <input type="checkbox"/> Work	
Spouse's Student Number	Last Name	First Name	Middle Name	Mailbox
Date	E-Mail Address		<input type="checkbox"/> Home <input type="checkbox"/> Work	

Date you are leaving: _____ Date to close box: _____

Address update only; do not close box. I will be continuing to enroll in Summer Fall Winter Spring

OLD ADDRESS(ES)

What kind of address is this? Home Business/Church/Mission Other _____

When should use of this address be discontinued? _____

Street Address or P.O. Box			Area and Telephone Number
City	State	Zip/Postal code	Country

What kind of address is this? Home Business/Church/Mission Other _____

When should use of this address be discontinued? _____

Street Address or P.O. Box			Area and Telephone Number
City	State	Zip/Postal code	Country

NEW ADDRESS(ES)

Permanent Temporary until _____

What kind of address is this? Home Business/Church/Mission Forwarding address (relative or friend)

Street Address or P.O. Box			Area and Telephone Number
City	State	Zip/Postal code	Country

Permanent Temporary until _____

What kind of address is this? Home Business/Church/Mission Forwarding address (relative or friend)

Street Address or P.O. Box			Area and Telephone Number
City	State	Zip/Postal code	Country