CHANGE OF NAME AND ADDRESS
HUNTINGTON UNIVERSITY
OFFICE OF THE REGISTRAR

ID# ___ ___ ___ ___ ___ ___ **NAME:** _____
LAST **FIRST** **MIDDLE**

CHANGE OF ADDRESS:

☐ Permanent Address ☐ Temporary Address (Dates _____)

STREET: _____

_____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE NUMBER: (_____) _____ ☐ Cell ☐Home

PHONE NUMBER: (_____) _____☐ Cell ☐Home

**Is this also a new address for your parent(s), spouse or children? ☐ Yes ☐ No

**Is this also a new phone number for your spouse? ☐ Yes ☐ No

List Names Below

NAMES: _____
LAST FIRST MIDDLE
☐Parent ☐Child ☐Spouse

_____
LAST FIRST MIDDLE
☐Parent ☐Child ☐Spouse

CHANGE OF NAME & NEXT OF KIN: (if applicable)

PREVIOUS NAME: _____

NEW LEGAL NAME: _____
LAST FIRST MIDDLE

SPOUSE: _____
LAST FIRST MIDDLE

EFFECTIVE DATE: _____/_____/_____

SIGNATURE* _____ **DATE** ____/___/_____

***Federal law requires the student's signature for processing.**
No requests will be processed without the appropriate signature.