



Shawnee State University

## Change of Name/Address/Phone #/E-mail

ID: \_\_\_\_\_

Current Name: \_\_\_\_\_

New Name: \_\_\_\_\_

### Permanent Address

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Are you a resident of New Boston, Ohio?  YES  NO

Telephone: \_\_\_\_\_

### Mailing Address

*Complete this section if you want your University Mail (student bills, grades, payroll checks, AP checks, etc.) to be delivered to an address other than your permanent address. Campus housing students need not complete this section as your University mail will be directed to your campus mail box automatically while you live in campus housing. Please indicate an ending date for this mailing address if one is known.*

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Are you a resident of New Boston, Ohio?  YES  NO

Telephone: \_\_\_\_\_

Ending Date: \_\_\_\_\_

### E-mail Address

\_\_\_\_\_

### Marital Status

Single  Married  Divorced  Widowed

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date