



# Student Name/Address Change Form

OFFICE USE ONLY

Date Updated: \_\_\_\_\_  
Initials: \_\_\_\_\_

**Please Note:** Change of Address may affect billing status.  
Student workers/employees need to make changes with the student payroll office

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

Student Status:  Undergraduate  Graduate  Post Baccalaureate

Name: (as it currently appears on records)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Handwritten Signature Only

### Only complete the information below that you want to change

#### 1. Name Change: (You must provide proof of name change: Marriage License or Court Order)

\_\_\_\_\_

Print your name as you would like it to appear on your permanent records.

#### 2. New Address Changes:

##### - Permanent Address:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

New Home Telephone Number: \_\_\_\_\_

##### - Local Address: (Address while attending Kutztown University)

Check if you no longer have a local address

Local Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

New Local Telephone Number: \_\_\_\_\_

#### 3. FERPA: I elect for the University not to disclose my:

- Permanent Address  Local/Campus Address  Place & Date of Birth
- Permanent Telephone  Local/Campus telephone #  KU E-mail Address
- Major/Minor

#### 4. Emergency Contact: (This information will only be used only in an emergency)

Contact's Name: \_\_\_\_\_

Relationship to Student: (Parent, Guardian, Spouse, Other) \_\_\_\_\_

Daytime Telephone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_