

# Capital University

## CHANGE OF NAME/ADDRESS

Please Print

Current name: \_\_\_\_\_ ID# \_\_\_\_\_  
Last First Middle

Change Name To: \_\_\_\_\_  
Last First Middle

Old Address: Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employer \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

New Address: Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employer \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

This Change is:

Parents Address \_\_\_\_\_ Permanent Address \_\_\_\_\_ Local Address \_\_\_\_\_ Employer \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*NOTE: If your name changes due to marriage, a copy of the marriage license is required. For name changes due to other reasons, a copy of the court order is required.

Office:

Please send updated information to Pam Shipp ([probbins@capital.edu](mailto:probbins@capital.edu)) in Mail services and Crystal Reynolds ([creynolds@capital.edu](mailto:creynolds@capital.edu)) in Advancement