

**Presbyterian College
Student Address Change Form**

Name: _____ ID: _____
Last First Middle ID Number

Print and complete form and submit to the Office of the Registrar.

Permanent address (10)	
_____	_____
_____	_____
_____	Email Address: _____
County: _____	County: _____
Home Phone: (____) _____	Cell Phone: (____) _____

Parent/Guardian (20) /Emergency Contact (29)	
PLEASE SPECIFY IF <u>BOTH</u> PARENTS (Mr. and Mrs.) OR A <u>SINGLE</u> PARENT	
Name: _____	Check: __ parent __ guardian
Address: _____	__ other, indicate relation: _____
_____	Home phone: (____) _____
_____	Work phone: (____) _____
County: _____	Email Address: _____

Additional Address (if any)	
Name: _____	Check: __ parent __ guardian
Address: _____	__ other, indicate relation: _____
_____	Home phone: (____) _____
_____	Work Phone: (____) _____
County: _____	Email Address: _____

Signature

Date