

HUNTINGDON COLLEGE

Department of Evening Studies
W. James Samford, Jr. School for Business and Professional Studies
1500 E. Fairview Ave. Montgomery, AL 36106-2148
Office of the Registrar (334) 833-4431 Fax (334/833-4313)

Change of Address/Name Form

Please complete all appropriate portions of this form and return it to the Office of the Registrar. You may do this by mail, fax or in person. No changes can be made to your permanent record until this form is received with the appropriate paperwork (where applicable).

Name: _____
Prefix First Middle Maiden Last

Last four digits of SSN: _____ Location Attending: _____

For Name Change:

New Full Name _____
Prefix First Middle Maiden Last

Required documentation for the legal change of your name – **Social Security Card (copy)**

For Address Change:

Previous Address: Street _____
City, State, Zip _____
Home Phone () _____ Mobile Phone () _____

Current Address: Street _____
City, State, Zip _____
Home Phone () _____ Mobile Phone () _____

Does this address change apply to your parent(s)/guardian(s)? Y or N _____

Signature: _____ Date: _____