

BSU ADDRESS AND TELEPHONE NUMBER CHANGE FORM (PLEASE PRINT)
RETURN FORM TO: Human Resources Department (Employees) OR Registrar's Office (Students) [See Reverse Side for details]
(If you are both an employee and a student, only one form must be completed and returned to the Human Resources Department.)

Please check: Employee/Student Employee Student

Name: _____
Last First Middle

Banner ID: _____ or Last 4 digits of SSN: _____
(8-digit number starting with 0)

Date of Birth: _____ / _____ / _____ (for identification purposes only)
Month (mm) Day (dd) Year (yyyy)

I certify that I am the above-named person and that all information on this form is correct as stated.

SIGNATURE: _____ Day Phone Number: _____

DEFINITIONS - ADDRESS TYPES:

PERMANENT = permanent home/street address (not including PO Box). Every person should have this on file.

BILLING = address where tuition bills and vendor invoices should be sent, if different from permanent address

LOCAL = physical off-campus address, other than permanent, where a student/employee resides while enrolled/employed at the college

MAILING = preferred mailing address for general information, including PO Box address

PARENT = address of primary parent/guardian

NOTE: If you have three or more different addresses, please complete multiple forms.

DEFINITIONS –