



NORTHWEST
NAZARENE UNIVERSITY

Name & Address Change Form

1. Student Information

Former Name (Last, First MI)

Student ID

2. Name Change Information (attach supporting documentation)

New Name (Last, First MI) _____

Reason for change of name:

___ Marriage ___ Other (explain) _____

___ Court Order (Please provide documentation)

3. Change of Local Address

New Address _____

City _____, State _____ Zip _____

Phone # _____ Effective Date of Change _____

4. Change of Permanent Address (Address for contact off-campus)

New Address _____

City _____, State _____ Zip _____

Phone # _____ Effective Date of Change _____

This address applies to: ___ Self ___ Parents ___ Spouse ___ Other

5. Student Signature

Signature

Date