

CHANGE OF NAME, ADDRESS, E-MAIL, PHONE

INSTRUCTIONS: **Name Change;** Complete sections 1 & 2
E-mail Change; Complete sections 1 & 5

Address Change; Complete sections 1, 3 & 4
Phone Change; Complete sections 1 & 6

NOTE: Any student wishing to change their official name must provide proof of original official documentation with this form, and a photo-ID. Only notarized photo copies will be accepted.

Section 1.

1. MassBay 7-digit student ID _____
2. Social Security Number (optional) _____
3. Date Of Birth _____
4. Full Name (PRINT) _____
5. Phone _____
6. This change will take effect on (Date) _____

Section 2.

1. Previous Full Name (PRINT) _____
2. New Full Name (PRINT) _____

Present proof of original official documentation of new name with this form, or notarized photo copies.

Section 3.

1. Previous Address _____
2. City / State / Zip code _____
3. Check all that apply Permanent Address Home Address Mailing Address Billing Address Diploma Address

Section 4.

1. New Address _____
2. City / State / Zip code _____
3. Check all that apply Permanent Address Home Address Mailing Address Billing Address Diploma Address

Section 5.

1. Old E-mail Address _____
2. New E-mail Address _____

Section 6.

1. Old Phone number _____ Home Phone Mobile Phone Emergency Notification
2. New Phone number _____ Home Phone Mobile Phone Emergency Notification

FOR OFFICE USE ONLY

Date Received in Office:

Received By:

Date processed:

Processed By:

Signature _____

Date _____