



EASTERN KENTUCKY UNIVERSITY

Serving Kentuckians Since 1906

Request For Change of Address

***PRINT ALL INFORMATION COMPLETELY AND LEGIBLY**

FOR CURRENT AND FORMER STUDENTS: Return this completed form to the ECU Office of the Registrar (SSB 239) or mail to, Office of the Registrar, SSB CPO 58, 521 Lancaster Avenue, Richmond, KY 40475-3158 or fax to (859) 622 6207.

Full Name: First name Middle initial/name Last name

Social ID Number: Date of birth: Month Day Year

New Permanent Address: City State ZIP Area code Phone

Are you graduating this semester? Yes No If Yes, do you want your new Permanent Address to be your diploma mailing address? Yes No

Do you want your Mailing Address to be different from the address above? Yes No

New Local Mailing Address: City State ZIP Area code Phone

Should bills be sent to an address different than the New Permanent Address? Yes No

Billing Address: City State ZIP Area code Phone

Emergency Contact: Name: Relation: Area code Phone

Signature: Date:



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