CHANGE OF STUDENT DEMOGRAPHIC INFORMATION FORM

Meredith College
3800 Hillsborough Street
Raleigh, NC  27607-2878
FAX 919-760-2878

___ Check here if you work on campus

Your classification (circle all that apply)  Student  Faculty/Staff  Alumna/alumnus

Change the following address types as noted below. Please circle all that apply.

**HMM**  Home Mailing Street, Route or PO Box. Where you wish to have official correspondence sent such as your account information

**HMR**  Permanent Residence Street or Route. Do not give a PO Box. Street address is required.

**CMM**  School Term Street or Route. If a PO Box, also list street address. Where you reside while attending Meredith and where you can be reached in an emergency. During the academic term you will also receive correspondence from Meredith College at this address.

Last Name  First Name  Middle Name

Student Identification Number ____________________________

New Address:

____________________________________________ Telephone _ _ _/_ _ _-_ _ _ _

Street

__________________________________________________________________________

City           State          County          Zip

Name Change:

Name: From________________________________________ To____________________________________

1. If you are an employee of Meredith College, including student employees, you must go to the office of Human Resources to change your name.

2. You must present legal documentation to change your name. A driver’s license, social security card, marriage certificate, divorce decree or court order will be accepted.

Other Changes:

New Emergency Contact: Name________________________ Day Phone _ _ / _ _ - _

Signed ___________________________ Dated: ___________________ Revised 10/2008