



Name Change/Address Change

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Current Student Name

Student ID#

Change (check all that apply):

Student Legal name (Please provide a copy of one of the following: Birth certificate, marriage license, divorce decree, court order)

Student Preferred first name

Local address  Permanent address  Billing address

Phone number  Email

Please enter any NEW INFORMATION below

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First Name

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Middle Name

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Last Name

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Street Address

City

State

Zip Code

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Phone(s)

E-mail

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Student Signature

Date

Please return this form in person to the Registrar's Office in Ryan Hall, Room 205, or by fax at 314-889-1487, or by email to [registraroffice@fontbonne.edu](mailto:registraroffice@fontbonne.edu).