



OFFICE USE ONLY
Date Processed: _____
Processor Initials: _____

Address Change Form

Print Student Name: _____ **Student ID#** _____

Student Signature: _____ **RISD Box#:** _____

Please read the following before completing this form:

- You **MUST** provide a local address and phone number (Home or Cell) if you are not living on campus.
- P.O. BOX addresses **cannot** be recorded as your residence address.
- International students use the **International Student Address Change Form**

**PLEASE PRINT CLEARLY*

Student Address Change	Parent Address Change
<p>Type of Address Change (Check ALL that apply):</p> <p><input type="checkbox"/> <i>Local</i> <input type="checkbox"/> <i>Permanent</i> <input type="checkbox"/> <i>Billing</i></p> <p>Print NEW address:</p> <p>Address Line 1: _____</p> <p>Address Line 2: _____</p> <p>Address Line 3: _____</p> <p>City: _____</p> <p>State & Zip Code: _____</p> <p>Preferred Mailing Address? YES or NO</p> <p>Preferred Residence Address? YES or NO</p> <p>HOME PHONE: _____</p> <p>CELL PHONE: _____</p> <p>E-mail: _____</p>	<p>Identify Parent: <input type="checkbox"/> Both Parents <input type="checkbox"/> Father Only <input type="checkbox"/> Guardian <input type="checkbox"/> Mother Only</p> <p>Print Name of Parent(s)</p> <p>_____</p> <p>Print NEW address:</p> <p>Address Line 1: _____</p> <p>Address Line 2: _____</p> <p>Address Line 3: _____</p> <p>City: _____</p> <p>State & Zip Code: (____) _____</p> <p>HOME PHONE: _____</p> <p>CELL PHONE: _____</p> <p>E-mail: _____</p>

***Note:** You are responsible for notifying the Registrar's Office anytime there is a change in address information.