



Office of the Registrar * 201 High Street * Farmville, VA 23909 * 434-395-2580 * FAX: 434-395-2252

Use this form to notify the Registrar's Office of name and/or address changes.
The student's signature is required at the bottom of this form.

STUDENT INFORMATION

Current Name (Last) (First) (MI) Student ID# (Longwood Id Preferred)
() E-Mail: @
Phone number

NAME CHANGE INFORMATION
(Copy of Supporting Documentation must be attached)

Supporting documentation:

- Marriage Certificate Court Order Social Security Card Valid Driver's License
 Other (please explain) _____

Former Name (Last) (First) (Middle)

New Name (Last) (First) (Middle)

CHANGE OF ADDRESS

CHANGE OF LOCAL ADDRESS (For Off-Campus Students Only – Students not living in dormitories)

Effective date of Change: Phone:

New Local Address: Street Address, Apt. #

City State Zip

CHANGE OF PERMANENT ADDRESS: (Where the University can contact you even after you graduate)

Effective Date of Change: Phone:

New Permanent Address: Street Address, Apt. #

City State Zip

STUDENT SIGNATURE: Date:

FOR OFFICE USE ONLY Date Processed: By: