

CHANGE OF ADDRESS, NAME AND/OR MARITAL STATUS



Personal Information:

Current name on file

Student number or SSN

Calvin e-mail address

New Address:

- This is a home address
 move my whole family (parents)
 move my spouse and I
 local address

New Name:

- Reason Request for preferred/nick name
 Marriage* (provide spouse info)
 Other

New name as to appear on record

Notes

Spouse Information:

Spouse name (first, middle last)

Spouse date of birth

Spouse Calvin ID, if known

***For name changes, we will need a copy of your new drivers license AND your marriage license (if getting married).**

Signature:

I verify that the changes and information above are accurate.
(students that work on campus must update payroll information)

Office use:

ID checked

Received by _____ Date _____

Processed by _____ Date _____