Office of the Registrar
Ochre Court, Room 203
100 Ochre Point Avenue
Newport, RI 02840-4192
Tel: 401-341-2943
sruregistrar@salve.edu

OFFICE USE ONLY
Date Recorded: _____
Recorder Initials:_____

CHANGE OF ADDRESS/PHONE

Instructions for Completing and Submitting This Form

1. **Download this PDF** and save it to your computer or mobile device before completing it. Do not complete the form in your web browser.
2. **Open the downloaded file using Adobe Acrobat Reader** or Adobe Acrobat Pro, then complete the form.
3. **Digitally sign the form** using Adobe Acrobat's signature feature: Select Fill & Sign or Certificates, depending on your version of Adobe Acrobat, then apply your digital signature in the designated signature area.
4. **Save the completed and signed form** to your device.
5. **Submit the form by email**: Current students must submit the completed form from their Salve Regina University email account.

Student Name: _____

Student Signature: _____

Student ID: _____

STUDENT ADDRESS CHANGE

Type of Address Change (Check ALL that apply):

☐ **Permanent/Home** ☐ **Mailing** ☐ **Billing**

Print OLD Address:

Number & Street: _____

Apartment: _____

City: _____

State & Zip Code: _____

Print NEW Address:

Number & Street: _____

Apartment: _____

City: _____

State & Zip Code: _____

Return this form to the Office of the Registrar by email at: ***sruregistrar@salve.edu***

STUDENT PHONE CHANGE

Print OLD Number:

Home Telephone: (_____) _____

Cell Phone: (_____) _____

Print NEW Number:

Home Telephone: (_____) _____

Cell Phone: (_____) _____

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