

NORFOLK STATE UNIVERSITY
OFFICE OF THE REGISTRAR
700 Park Avenue
Norfolk, VA 23504
(757) 823-8229 • Fax: (757) 823-8907

REQUEST FOR CHANGE OF ADDRESS, TELEPHONE NUMBER AND/OR EMERGENCY CONTACT

(Please Print)

ID: _____

NAME: _____
 LAST FIRST MIDDLE

PREVIOUS ADDRESS: _____

NEW PERMANENT ADDRESS: _____
 STREET APT#

 CITY STATE ZIP CODE

TELEPHONE: (____) _____

EMERGENCY CONTACT PERSON:

NAME: _____ Relationship: _____
 LAST FIRST

TELEPHONE: (____) _____

Signature of Student

Date

(Do Not Write Below This Line)

Signature of Registrar

Date Entered