

MARYLHURST UNIVERSITY
 Office of the Registrar
 17600 Pacific Highway (Hwy. 43)
 P.O. Box 261 • Marylhurst, OR 97036-0261
 503.699.6267; 1.800.634.9982
 FAX: 503.697.5596; Email: registrar@marylhurst.edu



REQUEST FOR CHANGE: ADDRESS OR PHONE

Name _____		ID # _____	
Signature _____		Date _____	
CHANGE OF ADDRESS			
Former Address		New Address	
_____		_____	
<small>(Street Address)</small>		<small>(Street Address)</small>	
_____		_____	
<small>(City)</small>	<small>(State)</small>	<small>(City)</small>	<small>(State)</small>
_____	_____	_____	_____
<small>(Zip Code)</small>	<small>(Zip Code)</small>	<small>(Zip Code)</small>	<small>(Zip Code)</small>
		<input type="checkbox"/> Home	
		<input type="checkbox"/> Work	
CHANGE OF PHONE			
Former Number _____		New Number _____	
		<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	
Former Number _____		New Number _____	
		<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	
CHANGE OF EMAIL			
Former Email _____		New Email _____	

Registrar _____ Date _____ 5/07

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<small>(Street Address)</small>		<small>(Street Address)</small>	
_____		_____	
<small>(City)</small>	<small>(State)</small>	<small>(City)</small>	<small>(State)</small>
_____	_____	_____	_____
<small>(Zip Code)</small>	<small>(Zip Code)</small>	<small>(Zip Code)</small>	<small>(Zip Code)</small>
		<input type="checkbox"/> Home	
		<input type="checkbox"/> Work	
CHANGE OF PHONE			
Former Number _____		New Number _____	
		<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	
Former Number _____		New Number _____	
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CHANGE OF EMAIL			
Former Email _____		New Email _____	

Registrar _____ Date _____ 5/07