

**CARSON-NEWMAN UNIVERSITY
ADDRESS / NAME CHANGE**

Current Name: _____ **ID Number:** _____

Email _____ Phone# _____ **or**
SS# : _____ - _____ - _____

NAME CHANGE

SS Card required : _____

Updated Name: _____ (Verified by)

* **Exactly as it appears on your SS Card** *

Reason for Change: ____ Marriage ____ Divorce (*copy of legal documentation required*) ____ Other

This change will alter your C-N E-mail Address, your C-N Login Username, and your C-N Account info

ADDRESS CHANGE

New Home Address

(*Students not residing in dorm*)

Street

City State Zip

Phone # Cell Home Other

New Billing Address

*(____) *Same as above*

Street

City State Zip

Phone # Cell Home Other

New Local Address

*(____) *Same as above*

Street

City State Zip

Phone # Cell Home Other

New Parent/Gardian

*(____) *Same as above*

Street

City State Zip

Phone # Cell Home Other

SIGNATURE: _____

DATE: _____

For Official Use only:

Date IT Help Desk notified
of **Name** change: _____

Address changed by: _____
Date: _____