

Change of Address Form

for Currently Enrolled Students Only

Washburn University

(785) 670-1074

registrar@washburn.edu

Print this form, complete requested information, and return to Washburn University at the address or fax number listed at the bottom of this form.

Washburn ID Number (WIN): _____ Name: _____
First MI Last

Provide New Information

Permanent Legal Address

_____ () _____
Street Apt. City State Zip Phone

Current Address (where you live while attending classes)

_____ () _____
Street Apt. City State Zip Phone

Student Signature **Date**

Mail to:
University Registrar's Office
1700 SW College Avenue
Topeka, KS 66621

Fax to:
(785) 670-1104

Email scanned form to:
registrar@washburn.edu