

Change of Address Form - For Currently Enrolled Students Only

Washburn University

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

Student ID No. (SSN) _____ Name _____
First MI Last

Provide New Information for these Items

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 University Registrar's Office Date

Mail to: Office of the University Registrar
Washburn University
1700 S.W. College Ave
Topeka, KS. 66621
Phone (785) 670-1074

Fax to: (785) 670-1104