

**Biola University, Office of the Registrar**  
**ADDRESS/NAME CHANGE FORM**

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Current Student

Previous Student (Address change only)

Name attended as \_\_\_\_\_  
Last First Middle

Biola ID# \_\_\_\_\_ Social Security # \_\_\_\_\_

**Name Change** – *Name changes only apply to current students*

*\*\*Official documentation in the form of a valid Social Security Card must accompany the request for a change of name.*

**New Name:** \_\_\_\_\_  
Title Last First Middle

Spouse's Name \_\_\_\_\_

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Address Change(s)**

Please check all that apply

- Local
- Billing
- Permanent\*\*
- International\*\*\*

\*\*Permanent Address must be different from Biola and must be in the USA

\*\*\*Must be outside of USA

**New Address** \_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Foreign Country Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Office Use Only:** (Attach copy of Name Change Document)

Name Updated \_\_\_\_\_ Address Updated \_\_\_\_\_  
Initial Date Initial Date