

Student Record Maintenance

Your signature is required in order to change your address in our records.

Please change permanent address information to (new address):

(In order to *change your name* you must submit a Name Change Form with appropriate documentation)

Name: _____

Student ID: _____

Street Address: _____

City/State: _____

Telephone: __ () _____ - _____

Signature: _____ Date: _____

**Fitchburg State College
Registrar's Office
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