CHANGE OF ADDRESS/NAME FORM

Hornet Central
Shenandoah University
1460 University Drive
Winchester, VA 22601

Phone: 540-665-4514
Fax: 540-665-5433
Email: hornetcentral@su.edu

If Faculty/Staff, have you taken any courses at Shenandoah University? □ Yes □ No

OLD INFORMATION

Name (F,M,L)__________________________________________ Phone:(  )________________________

Address:________________________________________________________

City:________________ State:_____ Zip Code:____________ County:__________

NEW INFORMATION

Name (F,M,L)__________________________________________ Phone:(  )________________________

Address:________________________________________________________

City:________________ State:_____ Zip Code:____________ County:__________

Please Check ALL that Apply:
□ Permanent Address Change □ Local Address Change □ Billing Address Change (INV)
□ Other Names Used: __________________________ □ Change in Marital Status to: S M D
 Preferred Mailing Address? □ YES □ NO
 Preferred Residence? □ YES □ NO

This change cannot be processed unless the following information is complete. For name change requests, please
include a copy of your updated driver’s license, marriage license/certificate or divorce decree. If you are
changing your permanent address from an out-of-state address to a Virginia address, you must provide
documentation verifying legal in-state residence, such as a copy of your valid Virginia driver’s license.
Thank You.

Signature:__________________________________________ Date:________________________

ID#:__________________________________________

Hornet Central Use ONLY
Information entered and verified

By (Initials): __________________________
Date: __________________________

Updated 07/02/14 - NSG