

## ADDRESS CHANGE FORM

**To change your address with LSU Eunice, please fill out the information below and mail or fax it to our office. Mail to: LSU Eunice, Student Records Office, P.O. Box 1129, Eunice, LA 70535 or fax: 337-550-1306.**

**DATE** \_\_\_\_\_ **NAME:** \_\_\_\_\_

**S.S. # or Student I.D. #** \_\_\_\_\_

<b>OLD</b>	<b>to be changed</b>	<b>NEW</b>
<b>ADDRESS</b>		
_____		
<b>CITY</b>		
_____		
<b>PARISH</b>		
_____		
<b>STATE &amp; ZIP</b>		
_____		
<b>PHONE</b>		
_____		

**STUDENT'S SIGNATURE** \_\_\_\_\_