ADDRESS CHANGE FORM

Student Name ________________________  Student ID ____________________________

PRINT NEW MAILING ADDRESS HERE:

Street___________________________________________
City_____________________________________________
State__________________________ Zip_______________

CONFIRM PHONE NUMBER HERE:

_________________________________________________________________

Student Signature________________________________________Date_____________________

Office Use Only - One Stop checklist:

1. SFAREGS Residency Code Review – current and future terms
2. SAAADMS Residency Code Review – current and future terms
3. SPAIDEN Expire previous address and Create new address with phone number

OS Processor________________________________________Date_____________________

Return to College Services One Stop, GBCC, 320 Corporate Drive, Portsmouth, NH 03801 T(603)427-7614 F(603)334-6308 AskGreatBay@ccsnh.edu

9/7/16