## BSU ADDRESS AND TELEPHONE NUMBER CHANGE FORM

(PLEASE PRINT)

RETURN FORM TO: Human Resources Department (Employees) OR Registrar's Office (Students) [See Reverse Side for details] (If you are both an employee and a student, only one form must be completed and returned to the Human Resources Department.)

Please check:	☐ Employee	e/Student Employee		Student	
Name:	Last	First		Middle	
Banner ID:	3-digit number starting with 0		Last 4 digit	s of SSN:	
Date of Birth:	Month (mm) / Day (dd)	/ (for Year (yyyy)	identification p	ourposes only)	
I certify that I am t	the above-named person	and that all information	on this form	is correct as stated.	
SIGNATURE:		Day Phone Num	ber:	Date:	_
ADDRESS CHA Please check <u>all</u> add		each address change listed	(see reverse s	ide for definitions):	
Check all that apply:  Permanent	Street Address 1				
☐ Billing ☐ Local	Street Address 2				
☐ Mailing ☐ Parent	Street Address 3				
	City	State	Zip Code	Country (other than United States	)
Check all that apply:  Permanent	Street Address 1				
☐ Billing ☐ Local	Street Address 2				
☐ Mailing ☐ Parent	Street Address 3				
	City	State 2	Zip Code	Country (other than United States	)
United States immigratio changes to the Immigration	n law currently requires that per	manent residents, international/e sing form AR-11 within 10 days of	xchange students,	TTS AND OTHER FOREIGN NATIO and other foreign nationals report all ad test version of the AR-11 form can be de	ldress
		Important Note for Stuo in-state does not automatical soutlined on: www.bridgew.e	lly change a stu	dent's residency for billing purposes esidency.cfm.	s. A
	UMBER CHANGE ne telephone type for each	ch number change listed (s	ee reverse sid	e for definitions):	
Permanent Local	☐ Cell	Day Parent	Area Code	Phone Number	
Permanent Local	☐ Cell	Day Parent	Area Code	Phone Number	
FOR OFFICE USE ONL Processed By: [Initials/Data]	Y Human Resources	☐ Registrar's Office	U Admis	ssions G Admissions	

## **DEFINITIONS - ADDRESS TYPES:**

PERMANENT = permanent home/street address (not including PO Box). Every person should have this on file.

**BILLING** = address where tuition bills and vendor invoices should be sent, if different from permanent address

**LOCAL** = physical off-campus address, other than permanent, where a student/employee resides while enrolled/employed at the college

MAILING = preferred mailing address for general information, including PO Box address

**PARENT** = address of primary parent/guardian

NOTE: If you have three or more different addresses, please complete multiple forms.

## **DEFINITIONS – TELEPHONE TYPES:**

**PERMANENT** = home telephone number

**CELL** = cellular telephone number

**DAY** = telephone number where you can be reached during the day

**LOCAL** = student local off-campus telephone number

**PAGER** = pager number

**PARENT** = primary parent or guardian telephone number

NOTE: If you have three or more different telephone numbers, please complete multiple forms.

## PLEASE RETURN TO:

EMPLOYEES –
HUMAN RESOURCES DEPARTMENT
BOYDEN HALL, ROOM 103
BRIDGEWATER, MA 02325
508-531-1725 (FAX)

STUDENTS –
REGISTRAR'S OFFICE
BOYDEN HALL, ROOM 003
BRIDGEWATER, MA 02325
508-531-6101 (FAX)

If you are both an employee and a student, only one form must be completed and returned to the Human Resources Department.