



Office of the Registrar
 300 Washington Avenue • Chestertown, MD 21620
 PHONE 410-778-7299 • FAX 410-810-7159
 EMAIL registrar@washcoll.edu
 WEB registrar.washcoll.edu

CHANGE OF ADDRESS FORM

Instructions:

Complete and submit this form to the Registrar's Office.

A. Student Information

Last Name	First Name	MI	Washington College ID#

B. New Address

Street			
City	State	Zip	Country
Phone number			

C. Do you wish your bills to be sent to this address? Y or N

D. Do you wish to have your other mail sent to this address? Y or N

E. Do your parents live at this address? Y or N

F. Are you a dependent of your parents? Y or N

G. Required Signature

Student Signature	Date

FOR OFFICE USE ONLY		
Date received: _____	Date Completed: _____	<input type="checkbox"/> Copy to Registrar's Office