

Please print this page, fill it out, sign it, and return to Registrar's Office by mail or fax.



South Dakota State University

Registrar's Office
ESC Box 511A
Brookings, SD 57007
Phone: 605-688-6195
Fax: 605-688-6384

<http://www.sdstate.edu/campus/records/index.cfm>

CHANGE OF ADDRESS AND EMERGENCY CONTACT FORM

The University will not accept accountability for non-receipt of mail when it is sent to the following addresses.

***PLEASE PRINT LEGIBLY**

Date _____ Student ID# _____

Name _____

Email _____

Permanent Address (summer mailings, 1098T forms)

No change

Street, Box or RFD _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ Work Phone _____

Local Address (campus correspondence)

No change

Street, Box or RFD _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ Work Phone _____

Parent/Family Address (sending SDSU Update, newsletters, etc.)

No change

Street, Box or RFD _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ Work Phone _____

Emergency Contact

Emergency Name _____ Phone Number _____

Signature

I attest that the information given above is true and accurate and understand that false information is punishable under federal law.