



# COVENANT COLLEGE

## Office of Records

14049 Scenic Highway Lookout Mtn, GA 30750

Phone: (706) 419-1134 Fax: (706) 419-1179

### Change of Address/Name Form

**Instructions:**

1. Fill out the form and submit it to the Office of Records by mail, fax, or in person. If you are changing your name, please provide legal documentation of the name change (marriage license, social security card, or driver's license).
2. Requests are processed and current students can check for the accuracy of changes on Banner.

**Current Legal Name:** \_\_\_\_\_  
Prefix First Middle Last Suffix

**Previous Legal Name:** \_\_\_\_\_  
Prefix First Middle Last Suffix

**Current Student:** Yes / No **Attendance Years:** \_\_\_\_\_

**Marital Status:** \_\_\_\_\_ Did spouse attend Covenant College? \_\_\_\_\_

If Married: Name of Spouse \_\_\_\_\_  
Prefix First Middle Last Suffix

**Permanent Address:** \_\_\_\_\_  
\_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Work Phone** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**Temporary Address** (if applicable): Until: \_\_\_\_\_ (Date)

**Parents' Permanent Address** (Current students only)

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