

Currently Enrolled Student Change of Contact Information

Currently enrolled students should use this form to change their contact information, or the contact information of their parent(s) or guardian(s). Return the completed form to the Registrar's Office in Center Hall, 115.

Student's First Name:	Middle:	La	st:
Student's Home Address			
Street:			
City:		State:	Zip:
Country:			
Phone:			
Email (other than Wabash.edu	I):(Note that only Wabash.edu email addresses		
tudent's Local Address	(Note that only Wabash.edu email addresses	should be used t	o conduct Wabash business)
			Room:
City:		State:	Zip:
Preferred Phone:			
Preferred Phone:ather's Name and Home Address (if		dress)	Cell Landline
Preferred Phone:ather's Name and Home Address (if Father's First Name:	different from Student's Home Ado	dress) Last	Cell Landline
Preferred Phone: (if ather's Name and Home Address (if Father's First Name: City:	different from Student's Home Add	dress) Last State:	
Preferred Phone: ather's Name and Home Address (if Father's First Name: City: Country:	different from Student's Home Ado	dress) Last State:	
Preferred Phone: ather's Name and Home Address (if Father's First Name: City: Country: Preferred Phone:	different from Student's Home Add	dress) Last State:	
Preferred Phone: ather's Name and Home Address (if Father's First Name: City: Country: Preferred Phone:	different from Student's Home Add	dress) Last State: Idress)	□ Cell □ Landline :: Zip: □ Cell □ Landline
Preferred Phone: ather's Name and Home Address (if Father's First Name: City: Country: Preferred Phone:	different from Student's Home Add Middle Initial: f different from Student's Home Add Middle Initial:	dress) Last State: Idress)	Zip: Cell
Preferred Phone: ather's Name and Home Address (if Father's First Name: City: Country: Preferred Phone: Mother's Name and Home Address (if Mother's First Name: City:	different from Student's Home Add Middle Initial: f different from Student's Home Add Middle Initial:	dress) Last State: Idress) Las	Zip: Cell