

OFFICE OF THE REGISTRAR

50 Oakland Street, Wellesley Hills, MA 02481 19 Flagg Drive, Framingham, MA 01702

E-mail: registrar@massbay.edu

Phone (781) 239-2550 Phone (508) 270-4050

www.massbay.edu/registrar/

TTY (781) 239-2513

CHANGE OF LEGAL NAME OR ADDRESS

INSTR	UCTIONS: Name C	hange: Complete sections 1 &	& 2 Addı	ress Change: Complet	e sections 1, 3 & 4	FOR OFFICE USE ONLY
Student must submit this form and a copy of official documentation of the legal name change such as a court approval of name change, marriage certificate, divorce decree, Social Security card,						Date Received in Office:
		ion papers to Registrar@				
Email must come from the student's MassBay email address only. Section 1. Required Section						
Sectio	MassBay 7-digit student ID					Received By:
••	Widssbay 7 digit	student ID				
2.	Social Security Number (optional)					
3.	Date Of Birth					
						Date processed:
4.	Full Name (PRINT)					
Section 2. To Be Completed If Changing Your Legal Name						
١.	Previous Legal Name (PRINT)					Processed By:
<u>2</u> .	New Legal Name (PRINT)					

Continue 2 and 4. To Do Consults of the Changing Visus Address						
Section 3 and 4. To Be Completed If Changing Your Address 1. Previous Address						
••						
2.	City / State / Zip code					
3.	Check all that apply	Permanent Address	Home Address	Mailing Address	Billing Address	Diploma Address
Coctio						
Section 1.	New Address					
••						
2.	City / State / Zip code					
3.	Check all that	Permanent	Home	Mailing	Billing	Diploma Address
	apply	Address	Address	Address	Address	•
	•	··· ·		··· ··	·· - ·····	
Signature: Date:						
Signat	ure.			Date		