

Change of Student Information

Previous Information

Please Print

Date: _____

Benedictine Student ID Number: _____ Email: _____

Name: _____
Last First Middle Initial

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

(Check one)

Is this still your parent's home address? Yes No

If yes, will you return to this address after the school year? Yes No

New Information

Please Print

Name: _____
Last First Middle Initial

****Supporting legal documentation is required for name changes
(i.e. court documents, marriage certificate, divorce papers, etc.)****

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ County: _____

Reason for Change: _____

Type of address:

Work Home Local Temporary Dates in effect:: _____

E-mail: _____

Signature: _____

*Please note that the phone number listed on this form is used for the Ben.Alert Emergency Notification System.
To update other contact information in that system, please go to www.ben.edu/benalert for more details.*

****For Office Use Only****

Student ID Number: _____

Office Generating Form: _____

Name and Date of Employee Recording Change: _____