



OFFICE OF THE REGISTRAR

Student Address Change Form

Student Information

Student's Name: _____

Last 4 digits of SSN: _____ Student ID Number: _____

New Address Information

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number : _____ Cell Number: _____

Email Address: _____

Effective Date: _____

- Permanent
- Temporary (From: _____ To: _____)

Student Signature: _____ Date: _____

Each time your address changes for college, you should alert both the USPS and the Registrar's Office to ensure continued prompt delivery of your mail.

Students who change either their permanent home address or their local mailing address are expected to complete a change-of-address form at the Registrar's Office. Failure to notify the Registrar's Office of address changes may cause serious delays in the handling of student records and in notifying students in cases of emergency. Students who have moved and who have not completed a change-of-address form are not exempt from the consequences of failing to receive official College notices and communications.

Please be advised change of address requests take approximately 3-5 business days to process.

Mail or submit to:
Office of the Registrar
California Northstate College of Pharmacy
10811 International Drive
Rancho Cordova, CA 95670