

## Student Local Address Information Form

Student ID/SS#	Acad	lemic Year		
Last Name	First Name		M.I.	
Student's Signature			Date	
Local Address information cannot be your Perman residency.  Commuter – Permanent and Local Address are to		clude the start and end da	tes of your off-campus	
	Permanent Address			
Current Address				
City	State	Zip Code	Phone	
L	ocal Address (Off-Campus onl	у)		
Townhouse/Apt. Complex Name (if applicable)		Start Date (required)	End Date (required)	
Address	Apt.#	Local Phone	Cell Phone	
City	I	State	Zip Code	

AP-08/09