

## **CHANGE OF NAME OR ADDRESS FORM**

Campus Site (Check One): Crownpoint, NM Ckirtland, NM Zuni, NM Creec Nos Pos, AZ Chinle, AZ

**Student's Name** 

**NTU ID Number** 

Date

Current \*Name or Address:

Change to:

Justification for change:

\*NOTE: Please attach a copy of court document, marriage license, or other document for any name changes.

Change entry completed on data base on		by	
	Date		Initials

**Xc: Student file** 

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