



ABRAHAM BALDWIN AGRICULTURAL COLLEGE

Address Change Request

Print this form, fill it out completely and mail or fax to:

Office of the Registrar (229) 391-5007 (Phone)
ABAC 7, 2802 Moore Highway (229) 391-4911 (Fax)
Tifton, GA 31793-2601

Important Note: Official ABAC correspondence will be sent to your **Mailing** address.
Both your Permanent and Mailing address will be updated unless you indicate otherwise.

Please Print

Name: _____ Banner ID #: _____

Address change is for (check one): _____

_____ Both Addresses _____ Permanent Address _____ Mailing Address

Old Address: _____

City, State, Zip, County: _____

New Address: _____

City, State, Zip, County: _____

Cell Phone: _____ Home Phone: _____

Student's Signature: _____

For office use only:		
Date Rec'd _____	Date Processed _____	Processed by _____