

The Texas A&M University System

HR 183 (11/01)

# Change of Address

*With few exceptions, you have the right to request, receive, review and correct information about yourself collected using this form.*

\_\_\_\_\_  
*Name (please print)*

\_\_\_\_\_  
*UIN*

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**Current mailing address (or previous if you have already moved)**

\_\_\_\_\_  
*Street/P.O. Box*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*ZIP*

\_\_\_\_\_  
*Home telephone number*

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**New mailing address**

\_\_\_\_\_  
*Street/P.O. Box*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*ZIP*

\_\_\_\_\_  
*Home telephone number*

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**New residential address (if different from mailing address)**

\_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*ZIP*

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**Effective date and signature**

This new mailing address and telephone number will become effective on \_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*