



One Ferncroft Road, P.O. Box 3340 Danvers, Massachusetts 01923-0840 (978) 762-4000 or (781) 593-6722

CHANGE OF ADDRESS FORM

DATE OF REQUEST _____

NAME _____
LAST FIRST MIDDLE

SIGNATURE _____ STUDENT ID _____

FORMER NAME (if applicable) _____

DATE OF BIRTH ____/____/____
Month Day Year

OLD ADDRESS _____

OLD PHONE _____

NEW ADDRESS _____

NEW PHONE _____

CELL PHONE _____

Please return completed form to: North Shore Community College
Enrollment & Student Records
1 Ferncroft Road
Danvers, MA 01923