



WESTERN  
NEW ENGLAND  
COLLEGE

## Change of Address Form

S.S. or ID #

Student's Name

Effective Date

Student's Non-WNEC Email Address

---

### New Permanent Address

Street

Apt. #

City

State

Zip

Home Telephone#

Cell phone#

---

### New Local Address

Street

Apt. #

City

State

Zip

Local Telephone#

---

### New Billing Address

Street

Apt.#

City

State

Zip

Student's Signature

Date

Processed by

Date

**Return to Student Administrative Services**  
**Fax: 413-796-2081**