



Office of International Programs
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CHANGE OF ADDRESS

Students must notify OIP within ten (10) days of any change to your physical address
or contact information. This is a requirement of the U.S. Government.

Contact Information:

DATE: _____ STUDENT ID #: _____

FAMILY/LAST NAME: _____

FIRST NAME: _____

PHONE NUMBER: Mobile: _____

Home: _____

SHU E-MAIL ADDRESS: _____

NON- SHU E- MAIL ADDRESS: _____

Old Address:

STREET NAME: _____

APT #: _____ CITY/TOWN: _____ STATE: _____

ZIP CODE: _____

New Address: (where you physically live in the U.S.)

STREET NAME: _____

APT #: _____ CITY/TOWN: _____ STATE: _____

ZIP CODE: _____