



## Change of Address and/or Phone Number

Name \_\_\_\_\_  
Last First Middle Maiden (if applicable)

E number \_\_\_\_\_

Former Address \_\_\_\_\_

New Address \_\_\_\_\_

Former Phone No. ( ) - New Phone No. ( ) -

Submit your completed form to one office only the office in the first relationship you check below.

- ☐ **Employee:** Return completed form to the Office of Human Resources, Box 70564, Room 307, Burgin Dossett Hall, Johnson City, TN; fax: (423) 439-8354
- ☐ **Medical Resident:** Return completed form to the Office of Graduate Medical Education, Quillen College of Medicine, Box 70415, Stanton-Gerber Hall (VA campus), Room C-216, Johnson City, TN 37614; fax (423) 439-8910
- ☐ **Medical Student:** Return completed form to the Registrar, Quillen College of Medicine, Box 70580, Room C-247, Stanton-Gerber Hall (VA campus), Johnson City, TN; fax (423) 439-2110
- ☐ **Pharmacy Student:** Return completed form to the Registrar, Gatton College of Pharmacy, Box 70414, Room 216, Building 7 (VA campus), Johnson City, TN; fax (423) 439-6320
- ☐ **Student** (other than medical or pharmacy student): Return completed form to the Registrar, Box 70561, Room 101, Burgin Dossett Hall, Johnson City, TN 37614; fax (423) 439-6604
- ☐ **Donor or Alumnus /Alumnae** (alums are individuals who have not been enrolled in classes at ETSU for one or more semesters): Return completed form to the Office of Advancement, Box 70712, Room 303, Burgin Dossett Hall, Johnson City, TN 37614; fax (423) 439-5836

Signature \_\_\_\_\_ Date \_\_\_\_\_

**For university use only**

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