

Use this form to update your address in your record.

Student Information:

Last Name	First Name	MI	Student ID
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Local Address – When classes are in session please use the following:

Address: Street/PO BOX	City	State	ZIP Code
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Permanent Address – When classes are NOT in session please use the following:

Same as local

Address: Street/PO BOX	City	State	ZIP Code
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Student Signature	Date
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CMC Employee?

OFFICE USE ONLY

Processor	Date	Colleague	Etrieve	HR
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This form is processed by Registration Staff on Campus.

Office of the Registrar
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 registrar@coloradomtn.edu