

The Sage Colleges

Request for Change of NAME/ADDRESS/TELEPHONE NUMBER

Individual's SSN: _____ Sage ID#: _____

Name: _____

I am requesting that you change my (circle ALL that apply):

NAME ADDRESS TELEPHONE NUMBER GUARANTOR*
Name changes require official documentation

* If Guarantor's (person responsible for the payment) address needs to be changed please circle and have Guarantor sign this form. If **YOU** are the Guarantor please sign in Guarantor's spot for **any** changes

Please indicate which **Address(es)** and/or **Telephone Number(s)** we should change (circle all that apply):

H – Home (permanent or parent's address)
Typically used for Financial Aid, Grade, 1098
And W-2 type mailings.

L – Local (off campus address)
Used for local contact purposes.

B – Business

AR – Billing address (Guarantor's address)

EME – Emergency
Contact information for someone other than yourself.

Note: A single address can serve as multiple address types.

OLD Information: _____
(if necessary)
Type: _____

Phone: _____

NEW Information: _____

Type: _____

Phone: _____

Individual's Signature: _____ Date: _____

*Guarantor's Signature: _____ Date: _____

*By signing as Guarantor, I accept responsibility for payment of this student's tuition and other charges at The Sage Colleges.

Office use only	Home address should always be marked as 'preferred' address
Corrections to address(es) do not need history maintained. Change of address(es) need to have address history maintained. Ensure old address is not marked as 'current'.	
Date changed entered: _____	Office code: _____ Employee initials: _____