



JACKSON STATE UNIVERSITY

P. O. Box 17028
JACKSON, MISSISSIPPI 39217-0228

OFFICE OF
HUMAN RESOURCES

(601) 979-2015
FAX No. (601) 979-5856

CHANGE OF ADDRESS FORM

Faculty and Staff Personnel are requested to complete this Change of Address Form and submit it to the Office of Human Resources as soon as they know their new address and telephone number.

Social Security Number		New Telephone Number	
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Your Name (Print or Type)	Last Name	First Name	Middle Initial
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Old Address	Number and Street, Apt., Suite, P. O. Box or R.D. _____ City, State and Zip Code: _____
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New Address	Number and Street, Apt., Suite, P. O. Box or R.D. _____ City, State and Zip Code: _____
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Signature	_____ Date New Address in Effect _____
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