



**Talladega College**  
*Office of the Registrar*  
**Change of Address Form**

SS# \_\_\_\_\_

Student's Name \_\_\_\_\_

Previous Address \_\_\_\_\_

\_\_\_\_\_

Telephone # \_\_\_\_\_

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

\_\_\_\_\_

Telephone # \_\_\_\_\_

Date Received \_\_\_\_\_ Date Processed \_\_\_\_\_

PRINT THIS FORM AND DROP OFF or MAIL TO:

**Office of the Registrar**  
**Talladega College**  
**Talladega, AL 35160**