

Office of the Registrar 633 Clark Street Evanston, Illinois 60208

nu-registrar@northwestern.edu

Change of Parent/Guardian Contact Information

		Student Inf	ormation		
PLEASE PRINT Full Name(Last)		(First)		Date (Middle)	:
I.D. Number		School		Clas	s
Fi	ll out only the i	nformatio	n needing cha	nged below	
	Р	arent/Guai	rdian/Spouse		
Name:					
Address: (Nui	mber and Street)				
(City	r)	(State)	(Zip code)	Phone:	
Email Address: (For purposes of emails	ng Commencement in	formation)			
Se	econd Parent Info	rmation: If d	lifferent from th	ne address above	
Name:					
Address: (Nur	mber and Street)				
(City	')	(State)	(Zip code)	Phone:	
Email Address: (For purposes of emaili	ng Commencement in	 formation)			

This form must be submitted directly by the student.

If this affects your billing address please update the address through the Profile Tile in your Caesar account.