

Address Update Form

Sign, complete & mail this form to: Rutgers, The State University of NJ, ATTN: Registrar's Office. Mail your Address change request to the campus you last attended. Please allow 7-10 business days for processing. Effective date of change: _____

New Brunswick Registrar
ASB, Room 200B or 200F
65 Davidson Road
Piscataway, NJ 08854-8096
FAX: 732-445-5948

Newark Registrar
Blumenthal Hall, Rm 309
Newark, NJ 07102
FAX: 973-353-1357

Camden Registrar
311 North 5th Street
Camden, NJ 08102
FAX: 856-225-6453

Name (last, first, middle initial): _____

Student I.D. (RUID #): _____ School: _____

New Address: _____

Phone: (_____) _____ N.J. County: _____

Email address: _____

Signature: _____ Date: _____