Department Change of Address

This form is to show an official change of address for a department on the Kansas State University Campus. By filling out this form you insure that your department's mail is delivered to the correct location in an efficient manner.

NOTE: This form is for Departments that are moving to a new location, not for the move of an individual person. Central Mail Services does not sort mail by a person's name. The mail is sorted to the KSU Department that is listed on the mail piece.

Date of Move: _____

Does Mail	need to be held	d? Yes	or No	

If yes, date to begin holding: _____

Held mail will be held until the date listed below.

Date to Receive Mail at New Location:

Department Name:

Department's Old Address:	

Building Location:	
0	

Contact Phone Number: _____

Department's New Address:	
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Building Location:

Contact Phone Number: _____

By filling out and signing I certify that this is an official move of a KSU Department.

Authorized Signature: _____

Printed Name: _____

Please send Signed original to: Central Mail Services 109 Dykstra Hall

And a copy to: Attn: Resource Center & Operations Human Capital Services 103 Edwards Hall