

### CHANGE OF ADDRESS

EFFECTIVE AS OF(date):	CLASS YEAR: 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> Graduate <input type="checkbox"/> MCL <input type="checkbox"/> LLM <input type="checkbox"/> Visitor <input type="checkbox"/>	
NAME	STUDENT #(7 DIGIT)	
STREET	APT	
CITY	STATE	ZIP
HOME PHONE(    )	CELL PHONE(    )	
WITHHOLD INFORMATION DISCLOSURE: Please mark the appropriate boxes and sign below if you wish to withhold disclosure of this information		
<b>YES, RESTRICT ACCESS TO: ADDRESS:</b> <input type="checkbox"/>	<b>PHONE:</b> <input type="checkbox"/>	

Signature

Date

**Please send to:**  
California Western School of Law  
225 Cedar Street  
San Diego, CA 92101