



OFFICE OF THE REGISTRAR
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Your signed request can be sent:

By mail to: University of Puget Sound
Office of the Registrar
1500 N Warner St #1034
Tacoma, WA 98416

by email: registrar@pugetsound.edu
by fax: 253.879.3108

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UPSID or Last 4 of Social Security Number: _____

Name: Last _____ First _____ Middle _____

Former Name(s): _____ Birth Date: _____

Address: _____

City: _____ State/Province: _____ Postal Code _____

Phone Number: (_____) _____ Alternate number: (_____) _____

Email: _____ Update my mailing information

Graduation Year or Approximate Dates of Attendance: _____

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