Brian K. Krolicki
State Treasurer

Susan K. Moore
Director

Kenny C. Guinn
Governor

GOVERNOR GUINN
MILLENNIUM SCHOLARSHIP PROGRAM

Clear Form

CHANGE OF ADDRESS REQUEST

I,_____, request the change of my address to:

_____
Street name & number

_____
City, State & Zip Code

_____
Telephone Number

as of this date _____.

MSID# _____ SSN# _____
(Millennium Scholarship ID Number)

Date of Birth _____

Student's Signature_____

If you have any question please contact The Governor Guinn Millennium Scholarship Office at (702) 486-3383 or toll free at (888) 477-2667.

Office of the State Treasurer
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