

# Address Information Form



## YOUR INFORMATION

Last name:

First name:

Cell phone number: (      )

Home phone number (land line): (      )

## ADDRESS INFORMATION

Local address (if **NOT** living in JTS residence hall/apartment):

City:

State:

ZIP:

Country:

## EMERGENCY CONTACT ADDRESS/PHONE INFORMATION

Name of emergency contact:

Relationship to student:

Cell phone number: (      )

Work phone number: (      )

Home phone number: (      )

Email:

Address:

City:

State/Prov.:

ZIP/Postal code:

Country:

## PARENT ADDRESS IF DIFFERENT FROM EMERGENCY CONTACT ADDRESS *(for List College students only)*

Cell phone number: (      )

Work phone number: (      )

Home phone number: (      )

Email:

Address:

City:

State/Prov.:

ZIP/Postal code:

Country:

**Completed forms should be submitted via your admissions portal ([admissions.jtsa.edu/status](https://admissions.jtsa.edu/status)).**