



**Only fill out sections that are applicable**

**International Address Request Form**

**Please provide a valid address in order for us to complete your admission process.**

To expedite the process you can submit the information online at: [www.uh.edu](http://www.uh.edu)

Instructions:

1. Select **“Prospective Students”**
2. Select **“Enrollment Services Online” [Login]**
3. Enter your **Student Identification Number and PIN**
4. Select **“Records”**, select **“Address Change”**
5. **[Edit]** your **“International Address”** fields, and **[Submit]** your changes

Or complete this form and return to the address below:

Street \_\_\_\_\_

Street \_\_\_\_\_

Street \_\_\_\_\_

City/Province \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Country \_\_\_\_\_

Telephone \_\_\_\_\_

**University of Houston**  
**Office of International Admissions**  
**122 E Cullen Building**  
**Houston, TX 77204-2023**

**Email** \_\_\_\_\_

(PLEASE PROVIDE VALID EMAIL ADDRESS)

**Ethnic Background**

Please indicate which of the following groups best describes your ethnic background. This information is voluntary and will be used in a nondiscriminatory manner, consistent with applicable civil rights laws. This information will be used for federal and/or state law reporting purposes only and will not be used in any admission or scholarship decisions.

- American Indian/Alaskan Native  African American/Black  Asian/Pacific Islander  Hispanic/Latino  White/Non-Hispanic

**Permission Release**

In order to protect your privacy rights, the Office of International Admissions requires that all students give written permission specifying the person who may have access to the information concerning the status of his or her application and/or admissions to the University of Houston to the University of Houston.

If you wish to designate someone access to this information, please complete the information below:

I, \_\_\_\_\_, give \_\_\_\_\_

(PRINT YOUR NAME) (PRINT NAME OF FRIEND OR RELATIVE)

permission to request information concerning the status of my application and/or admission status to the University of Houston. I further give permission to the University of Houston to release this information to this person upon request. I understand that the above named person(s) may be required to show proof of picture identification when requesting information in person. I also understand that if the information is requested by telephone by this person, complete information as to my 1) full name, 2) student number, 3) date of birth and 4) complete address must be stated in order for any information to be released from our office to the designated person.

\_\_\_\_\_  
Signature \_\_\_\_\_ Date

\_\_\_\_\_  
Student Number