



Mississippi Board of Psychology  
2395 Deerfield Road  
Yazoo City, MS 39194  
Toll Free (888) 693-1416; Fax (662) 716-0336  
www.psychologyboard.state.ms.us

## ADDRESS CHANGE FORM

Licensee Name: \_\_\_\_\_

License #: \_\_\_\_\_

### OLD BUSINESS ADDRESS

Company Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

### NEW BUSINESS ADDRESS

Company Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

### OLD HOME ADDRESS

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

### NEW HOME ADDRESS

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Business Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Home Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Which address do you choose to be published? Business Address \_\_\_\_\_ Home Address \_\_\_\_\_

Which address do you choose for Board correspondence? Business Address \_\_\_\_\_ Home Address \_\_\_\_\_

Mississippi Board of Psychology  
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