



**THE STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
DEPARTMENT OF HUMAN SERVICES OFFICE OF CHILD SUPPORT SERVICES**

77 DORRANCE STREET PROVIDENCE RI 02903

(401)-458-4400 • [WWW.CSE.RI.GOV](http://WWW.CSE.RI.GOV)

**CHANGE OF ADDRESS FORM**

**CHANGE OF ADDRESS INFORMATION**

YOU MAY USE THIS FORM TO REPORT A CHANGE OF ADDRESS IN YOUR CHILD SUPPORT CASE. HOWEVER, IF YOU ARE RECEIVING RI WORKS BENEFITS OR RITE CARE BENEFITS YOU MUST REPORT A CHANGE OF ADDRESS TO YOUR ELIGIBILITY TECHNICIAN. WE CANNOT CHANGE THE ADDRESS AT THE OFFICE OF CHILD SUPPORT SERVICES. IF THIS IS A PRIVATE CASE YOU MUST REPORT YOUR CHANGE OF ADDRESS BY USING THE CSS-1 FORM THAT CAN BE FOUND ON [WWW.CSE.RI.GOV](http://WWW.CSE.RI.GOV) .

**IN ORDER TO CHANGE YOUR ADDRESS IN OUR SYSTEM, THE FOLLOWING INFORMATION IS NECESSARY.**

TODAY'S DATE:

CUSTODIAL PARENT NAME:

SOCIAL SECURITY NUMBER:

NON CUSTODIAL PARENT NAME:

SOCIAL SECURITY NUMBER:

WHICH ADDRESS IS BEING CHANGED?

CP [ ]

NCP [ ]

PREVIOUS ADDRESS:

STREET NUMBER

STREET NAME

CITY

STATE

ZIP CODE

CURRENT ADDRESS:

STREET NUMBER

STREET NAME

CITY

STATE

ZIP CODE

CURRENT PHONE NUMBER: (HOME)

CURRENT PHONE NUMBER: (CELL)

CHANGE IN ANY OTHER CASE INFORMATION:

NAME OF PERSON COMPLETING THIS FORM:

**BY SIGNING BELOW, I AUTHORIZE THAT ALL ABOVE INFORMATION IS CORRECT**

SIGNATURE/DATE

**YOU MAY MAIL A COMPLETED ADDRESS CHANGE FORM TO:**

**DEPARTMENT OF HUMAN SERVICES  
OFFICE OF CHILD SUPPORT SERVICES  
CHANGE OF ADDRESS FORM  
77 DORRANCE STREET  
PROVIDENCE, RI 02903**

**FOR ANSWERS TO QUESTIONS, OR FOR MORE INFORMATION, VISIT OUR WEBSITE AT [WWW.CSE.RI.GOV](http://WWW.CSE.RI.GOV)  
OR FAX COMPLETED FORM TO:**

**FAX: (401) 458-4407**

**OFFICE USE ONLY:**

**DATE RECEIVED:** \_\_\_\_\_