

Maryland Department of Health and Mental Hygiene
Board of Examiners for Audiologists, Hearing Aid Dispensers
and Speech-Language Pathologists
4201 Patterson Avenue, Baltimore, Maryland 21215-2299
Phone 410-764-4725 Fax 410-358-0273
Maryland Relay Service 1-800-735-2258

Notification of Change of Mailing Address

It is the responsibility of the licensee to report any change of mailing address to the Board within 30 days of the change. Do not use this form to report a name change – please use the Name Change Form.

I, _____, submit that my official
mailing address has been changed to:

Street

City

State

Zip Code

The address change was/is effective on: _____

Signature

AUD/HAD/SLP license #

Date

E-mail

Phone

This form may be sent to the Board in one of two methods:

- 1) mail form to: Board of AUD/HAD/SLP, 4201 Patterson Avenue, Baltimore, Maryland 21215-2299; or**
- 2) fax to 410-358-0273.**