



Mississippi State Board of Examiners For Licensed Professional Counselors

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Jackson, MS 39201

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Website: www.lpc.ms.gov

Address Change Form

Name _____ License # _____

Cell Phone _____ Email Address _____

OLD BUSINESS ADDRESS

Company Name: _____

Business Address: _____

City _____ State _____ Zip _____

NEW BUSINESS ADDRESS

Company Name: _____

Business Address: _____

City _____ State _____ Zip _____ County _____

Business Phone: _____

OLD HOME ADDRESS

Home Address: _____

City _____ State _____ Zip _____

NEW HOME ADDRESS

Home Address: _____

City _____ State _____ Zip _____ County _____

Home Phone: _____

Which address and phone number do you choose to be published in Data Detail at www.lpc.ms.gov ?

- Business Address Home Address

Which address do you choose for Board correspondence?

- Business Address Home Address