

# Student Information Change Form



**Directions:** Complete **CURRENT DATA**. Request necessary changes in **NEW DATA** and furnish any applicable documentation requested. **SIGN** and **RETURN** to Admissions & Records, ISC 128.

## CURRENT DATA

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

Student ID: \_\_\_\_\_

**OR**

SSN: **X X X - X X -** \_\_\_\_\_ & DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

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## NEW DATA

Change my name to: \_\_\_\_\_

**Student Must Provide Legal Documentation of Name Change**

Change my address to: \_\_\_\_\_

Change my phone number to:

Cell: (\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

Home: (\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

Work: (\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

I received a High School Diploma or GED from: \_\_\_\_\_

Date completed: \_\_\_\_\_

Change my Social Security Number to: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Student Must Present Social Security Card**

Other Change: \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Admissions Office Use:

Updated

Scanned

By: \_\_\_\_\_ Date: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_