

This form must be submitted with valid photo ID. If you are providing or correcting your social security number you must provide your social security card. Before submitting this form to Admissions & Records district employees must contact the Human Resources Office and student employees must contact the Student Employment Office. Please use **BLACK OR BLUE INK ONLY.**

Name on File: _____
Last Name First Name Middle Initial

Student ID or SSN: _____ **Date of Birth:** _____
Month Day Year

Name Change: You must attach a copy of a legal document reflecting your new name. Your original WebAdvisor User ID, RCCD student email address, and Blackboard login will not change.

New Name: _____
Last Name First Name Middle Initial

Address Change:
Permanent Address (required):

Number and Street Apt# City State Zip

Mailing Address (if different from Permanent Address):

Number and Street Apt# City State Zip

Phone Number: _____ **Release Directory Information:** Yes No

It is strongly recommended that you talk to a counselor before making the following changes:

Academic Program Change: _____ **Educational Goal Change:** _____
Program of Study Code

Admit Status Change: First-Time College Student Transfer Student Returning Student
 Concurrent High School Student (enrolled in high school and college at the same time)

High School Information Change:

I received a high school diploma from _____ located in _____.
Name of School City, State OR Foreign Country

I started attending this high school in _____ and graduated in _____.
Month/Year Month/Year

I received my G.E.D. from _____, located in _____, in _____.
Name of School City, State OR Foreign Country Month/Year

I passed the California High School Proficiency Exam at _____ in _____.
Name of School Month/Year

Other Changes: _____

Student Signature: _____ **Date:** _____

OFFICE USE ONLY	
<small>A&R Tech</small>	<small>Date</small>