



MVC Student Change of Information Form

District employees must also contact the Human Resources Office.

Student employees must also contact the Student Employment Office

This Form must be submitted with a valid Photo ID

NAME ON FILE:

_____ Last Name (Please print)

_____ First Name

_____ Middle Initial

STUDENT ID/SSN NO. _____

DATE OF BIRTH: _____

Month

Day

Year

NAME CHANGE: YOU MUST ATTACH A COPY OF A LEGAL DOCUMENT WITH NEW NAME

Note: Your original WebAdvisor log in, RCCD email address, and Blackboard log in will not change.

New Name: _____

Last

First

M.I

SOCIAL SECURITY NUMBER: _____

PHONE NUMBER: (____) _____

Must present SSN card

ADDRESS CHANGE

Permanent address (required):

Mailing Address (if different from permanent address):

_____ Street Address

_____ Apt#

_____ Street Address

_____ Apt. #

_____ City

_____ State

_____ Zip

_____ City

_____ State

_____ Zip

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

Academic Program Change: _____

Educational Goal Change: _____

See list of Programs of Study

ADMIT STATUS CHANGE: First-time Student Transfer Student Returning Student (RCCD)

Enrolling in HS and College at the same time

HIGH SCHOOL : (Please check appropriate box and fill out necessary information.

I have a HS diploma from _____ and I attended there from

_____ (month/year) to _____ (month/year) in _____ (US State/Foreign Country)

I have received my GED from _____ on _____ (month/year) in _____ (US State).

I have passed the California HS Proficiency Exam at _____ on _____ (month/year).

RELEASE DIRECTORY INFORMATION: Yes No

OTHER CHANGES: _____

Student Signature

Date

A&R Technician

Date