



Student Change of Information

District employees must also contact the Human Resources Office
Student employees must also contact the Student Employment Office
Students must submit this form with a photo ID

NAME ON FILE: _____

Please print Last Name

First Name

Middle Initial

STUDENT ID/SSN: _____ DATE OF BIRTH: _____

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

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

New Name: _____

Last

First

Middle

CHOSEN NAME: YOU MAY SELECT NAME FOR WHICH YOU WILL BE LISTED ON COURSE ROSTERS BUT NOT OFFICIAL TRANSCRIPTS

Last

First

Middle

SOCIAL SECURITY NUMBER: _____ - _____ - _____ PHONE NUMBER: (_____) _____ - _____

Must present SSN card

GENDER IDENTITY: _____ DIRECTORY INFORMATION: OK TO RELEASE YES: _____ NO: _____

ADDRESS CHANGE

Permanent Address (required)	Mailing Address (if different from permanent address)
Street Address	Street Address
City, State, ZIP	City, State, ZIP

ACADEMIC PROGRAM CHANGE: _____ EDUCATIONAL GOAL: _____

NOTE: It is strongly recommended that you see a counselor before making ACADEMIC PROGRAM & EDUCATIONAL GOAL changes.

ADMISSIONS STATUS CHANGE: 1st Time Student _____ Transfer Student _____ Returning Student _____

HIGH SCHOOL ATTENDED: _____ - _____ HS DIPLOMA: _____ GED: _____

Name of School

Years Attended

OTHER CHANGES: _____

STUDENT SIGNATURE: _____ DATE: _____

OFFICE USE ONLY:

A&R Signature

Date

DATE STAMP

NORCO
COLLEGE

A&R STAFF: _____