



Admissions and Records
Request for Change of Student Information

Student Name

_____-_____-_____
Social Security Number

Change of Address:

New Street Address: _____
Street City State Zip

New Mailing Address: _____
(If Different from Above) Street City State Zip

- Please note: If changing from out-of-district/out-of-state to In-District, you MUST fill out the REQUEST FOR CHANGE OF RESIDENCY form. You must meet the residency requirements to qualify for In-District tuition. (Please see the Temple College catalog under residency requirements or see an Admissions and Records Specialist for details) and provide approved documentation as required by the college. Approved documentation includes: Rental/Home Lease, Utility Bills, or Tax Documentation

Change of Contact Number or Emergency Contact Number:

Name: _____ Home: _____ Work: _____ Cell: _____

Correction of Social Security Number or Date of Birth:

As it appears on file or correct date of birth: _____-_____-_____
_____/_____/_____

Correct number: _____-_____-_____

- Please note: Change of Social Security Number requires a copy of your Social Security Card.

Name Change: From: _____

To: _____

- Please note: For a name change must provide the approved documentation as required by the college. Approved documentation includes: Marriage License, Divorce Decree, Court Order, or a Social Security Card.

***I certify the information I have given on this form is true and correct to the best of my knowledge.

Student Signature

Date _____

For College Use Only: Updated by: _____ Date: _____