



Mail Form To:
Enrollment Services
 SY CC 208
 P.O Box 19210
 Portland, OR 97280-0210
 enroll@pcc.edu

Enrollment Services
 Phone: 971-722-8888, Option 2
 Sylvania Fax: 971-722-4988
 Rock Creek Fax: 971-722-7419
 Cascade Fax: 971-722-5410
 Southeast Fax: 971-722-6336

Student Records Change of Information Form

Name changes require:

1. One piece of valid photo identification with current name **AND**
2. A copy of an official name change document

Valid photo identification: passport, Oregon Drivers License, military identification card, Alien Registration Receipt Card (with photograph), and photo identification cards issued by government agencies.

Official name change document: divorce decree, marriage license, immigration documents, etc.

Social Security Number changes must include a copy of the signed Social Security card.

Use this form to change/add the following information (check all that apply):

- Name
- Address/Phone
- Social Security Number

PCC OFFICE USE ONLY

Received by _____ Date _____ Campus _____

All documentation must be copied, validated and sent to the Student Records office for processing.

Previous Information:

			<u>G</u>
Last Name	First Name	Middle	Student ID No.
Address		Date of Birth	Phone #
City	State	Zip	Preferred Name
			Gender

New Information:

			<u>G</u>
Last Name	First Name	Middle	Student ID No.
Address		Date of Birth	Phone #
City	State	Zip	Preferred Name
			Gender

Student Signature

Date