

Change of Student Data Form

Office of Academic Records



PO Box 139 | Dryden, NY 13053-0139 | Phone: 607.844.6500 | FAX: 607.844.6550 | Email: acadrec@tomkinscortland.edu

Please complete and return with appropriate documentation to the Enrollment Services Center, room 101 or fax with appropriate documentation to 607.844.6550.

Please print clearly!

Student's Name (as entered in Tompkins Cortland Community College's records) and ID:

Last	First	MI	Student ID
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Check the item(s) below that should be changed in the College's records and print the NEW information in the space(s) provided below:

_____ **NAME** _____

Last	First	MI	Former
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(One of the following must be provided: marriage certificate, divorce decree, court order, passport, NYS driver's license)

Note: A social security card is **NOT** proof of name change.

Note: The name on your social security card must match the name on your financial aid application to receive aid. If in doubt, please contact the financial aid office.

_____ **SOCIAL SECURITY NUMBER** _____ - _____ - _____

A copy of your social security card must be provided to change/correct social security number

Note: The name on your social security card must match the name on your financial aid application to receive aid. If in doubt, please contact the financial aid office.

_____ **DATE OF BIRTH** _____

(One of the following must be provided: birth certificate, passport, NYS driver's license)

_____ **GENDER** _____

(One of the following must be provided: court order, passport, birth certificate, NYS driver's license)

SIGNATURE _____ **DATE** _____

Office Use only: Entered on _____ Initial _____

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