
Information Change Form

Current Name (Last, First, M.I.) _____

ID # _____

Check the items you need to update and provide the correct information as requested:

- Name Change:** You must provide a copy of your legal name (Driver's License, Social Security card, or legal document to do a name change.

Former Name (Last, First, M.I.): _____

- Corrected Social Security Number or Date of Birth:** _____
(You must provide a copy of your Social Security Card to update your Social Security Number.)

- New Mailing Address:**

Street: _____ City: _____ State: _____ Zip: _____

- New Phone Number:** _____

- New Program/Plan 1:** _____ **Requirement Term:** _____

- New Program/Plan 2:** _____ **Requirement Term:** _____

- New Program/Plan 3:** _____ **Requirement Term:** _____

- New Program/Plan 4:** _____ **Requirement Term:** _____

- New Program/Plan 5:** _____ **Requirement Term:** _____

- High School Graduated From:** _____ **Graduation Date:** _____

Diploma Type: Standard Advanced Studies Modified Standard General Achievement Other

- Received GED:** State: _____ Award Date: _____

- No High School Diploma or GED:** Last Date Attended: _____ Highest Grade Completed: _____

Name/Signature _____

Date _____

If you have lived outside of Virginia or if you have attended another college since you were last enrolled at MECC, please fill out the Domicile and Other Colleges Form and submit the two forms to the Admissions Office together.

OFFICE USE ONLY

- CHANGE FROM UNCLASSIFIED TO CURRICULAR

ES: _____ DATE: _____

Advisor assigned: _____