

CHANGE OF NAME/ ADDRESS/ PHONE No.

| Effective Semester : □ Fall | □ Spring | □ Summer | |
|------------------------------------|----------------------|-----------------|---|
| Student Id Number/ Social | Security Nu | ımber: | |
|] | Previous I | nformation | |
| Last Name: | | First Name: | |
| Middle/ Maiden Name: | | | |
| | New Inf | <u>ormation</u> | |
| Last Name: | | First Name: | |
| Middle/ Maiden Name: | | | |
| New Address: | | | |
| City: | | State: | |
| Zip Code: | | New Phone: (|) |
| Signature: | | Date: | |
| - | | | • |
| | FOR OFFICE USE ONLY: | | |
| | Recorded: | | |

Please Note: For a change of name, you must submit a new copy of your signed social security card with new last name. Please note that once a name change is processed it will immediately change on class rosters but will not change a student's email address or login credentials. Since a student's username is their unique identifier, your HCC email address and username will not change.