



Change of Student Data Request

Admissions and Records
2300 E. Gibson Road, Woodland, CA 95776
(530) 661-5700

PLEASE PRINT CLEARLY USING BLUE OR BLACK INK

Student ID: _____

Date: ____/____/____

Name: _____
Last First Middle

PLEASE CHANGE THE FOLLOWING TO:

New Name: _____ (Please attach documentation)
Last First Middle

New Social Security Number: _____ (Please attach copy of SSN card)

Correct Birth Date: ____/____/____ (Please attach documentation)

New Mailing Address: _____
City State Zip

New Phone Number: (____) _____

New Major: _____ (Please see College Catalog for Major options)

New Educational Goal: _____ (Please see options below)

Educational Goal Options:

A—Transfer to four-year college with an associate’s degree	G— Learn job skills (new career)
B—Transfer to a four-year college without an associate’s degree	H—Update current job skills
C— Earn a general education associate’s degree, A.A.	I—Maintain certificate or license
D—Earn a vocational associate’s degree, A.S.	J—Educational development
E—Earn a vocational certificate	K—Improve basic skills in reading, math, etc
F—Explore career interests, plans and goals	L—Complete high school credits

Student Signature: _____

FOR OFFICE USE ONLY:

Ed Goal Updated on MATI: _____

Major Changed on SPRO: _____

Received by: _____

Date Received: _____

Date Processed: _____