CYPRESS COLLEGE
Admissions and Records

Personal Information Change

Legal Name:				Date of Birth:	
	Last	First	M.I.		mm/dd/yyyy

Student Permanent ID Number:	@		OR SSN:		

☐ SSN Add ☐ SSN Removal ☐ SSN Correction	☐ Name Change ☐ Date of Birth Correction	☐ Campus Change ☐ Major Change _____ ☐ Education Level _____
	mm/dd/yyyy	

New Address:				
	Street (not a P.O. box)	City	State	Zip
Mailing Address If Different:				
	Street or P.O. box	City	State	Zip

New Telephone Number:		☐ home ☐ cell ☐ pager ☐ business Check one	New Email:	
	Area Code and Phone Number			

IMPORTANT: If you have ever been employed by Cypress College, Fullerton College, the School of Continuing Education, or North Orange County Community College District, you must also submit your changes to District Human Resources Office.

I hereby grant Cypress College permission to complete the change(s) I have requested above.

_____ _____ Effective Date of Change(s):_____
Student Signature Date

OFFICE USE ONLY

Accepted by:	Date:	Processed by:	Date:

Notes:_____

_____

_____

_____

Last First MI