



INSTRUCTIONAL TELEVISION

Student Information Change Form

Print your name, social security number and birth date—as they are now on your college records—in the first box below. Then complete ONLY the information that is changed in the space provided. Please sign and date the form at the bottom.

Current Student Information	
Last name: _____	
First name: _____	Middle Initial: _____
Social Security: _____	
Birth date: _____	

Complete New Information Here		Los Angeles Community College District Admissions & Records	
NEW Last Name		First Name	Middle Initial
NEW Social Security Number	NEW Birth date	NEW Telephone Number	
NEW Address: (check one) <input type="checkbox"/> LEGAL ADDRESS <input type="checkbox"/> MAILING ADDRESS <input type="checkbox"/> BOTH			
NEW Mailing Street Address		NEW City	
NEW State		NEW Zip Code	
NEW E-Mail Address			
NEW Major Code		NEW Directory Release Code	

Student Signature _____ Date _____

OFFICE USE ONLY Residence code: _____ Effective for: _____ By: _____
--

Instructional
Television 13356
Eldridge Avenue
Sylmar, CA 91342

Phone: (818) 833-
3595 Fax: (818) 833-
3598