Office of Admissions & Records
25555 Hesperian Boulevard • Hayward, California 94545
(510)723-6700 • Fax (510)723-7510 • ccarcom@clpccd.org
http://www.chabotcollege.edu/admissions

STUDENT DATA CHANGE FORM

Received date:_____

Received by clerk:_____

Student I D#_____

Name _____
Last First Middle

Please change my address to:

Address_____
Number and Street Apartment #

_____
City State Zip

☐ This is my Residence (not a PO Box)
☐ This is only my Mailing
☐ This is both Residence and Mailing

This is my new telephone number: ( ) _____

☐ **I would like to keep my address and telephone number confidential.**

I would like to change my name:

FROM_____**TO**_____
Last First Middle Last First Middle

I would like to:
☐ change my campus _____
☐ correct my birth date _____
☐ correct my SSN _____
☐ change my email address _____
☐ change my major code-please list number from the code sheet _____
☐ other change not listed above _____

I certify that the persons named above are one and the same person and that this request is made with no intent to defraud.

Signed: _____ Date:_____

☐ **I am an international student with the F1 Student Visa.***

FOR OFFICE USE ONLY:
Date posted by A&R_____ Initial _____

* Date SEVIS updated by ISP_____ Initial_____