

CHECK UPDATE - TERM, NAME, ADDRESS, PHONE OR EMAIL CHECK UPDATE REQUEST				
Student ID:	Date Requested:		<i></i>	(MM/DD/YYYY)
Last Name	First Name		MI	
Student Signature	Today's Date:			
TERM CHANGE REQUEST				
CURRENT TERM FALL2019		NEW TERM	SPR2020	
NAME CHANGE – TWO FORMS OF DOCUMENTATION ARE NEEDED				
☐ MARRIAGE LICENSE☐ DIVORCE DECREED☐ SOCIAL SECURITY CARD (Required)	ed before records are charged) – Check submitted documents □ BIRTH CERTIFICATE □ COURT ORDERED NAME CHANGE d)			
CURRENT NAME (print only) LAST:	FIDOT		MIDDLE"	
LAST:	FIRST:		MIDDLE"	
NEW NAME(print only)				
LAST:	FIRST:		MIDDLE"	
ADDRESS CHANGE				
☐ MAILING ADDRESS (MA) ☐ EMERGENCY /PARENT ADDRESS				
□ PERMANENT ADDRESS (PR)				
CURRENT				
STREET LINE 1				
STREET LINE 2				
CITY AND STATE				
ZIP / POSTAL CODE				
NEW ADDRESS				
STREET LINE 1				
STREET LINE 2				
CITY AND STATE				
ZIP / POSTAL CODE				
PHONE NUMBER CHANGE				
CURRENT PHONE TYPE	AREA CODE	PHONE NUMBE	R	
HOME (MA)				
PERMANENT (PR/EM)				
CELL /MOBILE (SMS) NEW PHONE TYPE	ADEA CODE	DUONE NUMBE	-n	
HOME (MA)	AREA CODE	PHONE NUMBE	:K	
PERMANENT (PR/EM)				
CELL/MOBILE (SMS)				
EMAIL UPDATE OR CHANGE				
PERSONAL EMAIL (EMPE)				