

STUDENT INFORMATION CHANGE FORM



**GATEWAY
COMMUNITY COLLEGE**
A MARICOPA COMMUNITY COLLEGE

This form is used to change official information to your student record. Provide your name and student number and complete only those areas in which you are requesting a change. Provide official documents as needed.

Name: _____

Student ID #: _____

	OLD INFORMATION	NEW INFORMATION
NAME		
ADDRESS		
SS#		
PHONE		
PLAN/SEMESTER		
GRADE BASIS*	Course # _____ Grade Basis _____	
OTHER		

* deadlines apply; see student handbook

Student Signature: _____

Date: _____

Processed by: _____ Date: _____