

# CHANGE OF INFORMATION

Name: \_\_\_\_\_ MC Student ID Number: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

**Please change the following checked item(s) in my student records:**

- Change of Address:**  
**Physical or Mailing (Please circle one)**

New Street Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

County \_\_\_\_\_

I have lived in Midland, Texas for \_\_\_\_\_ years and/or \_\_\_\_\_ months

*\*Please note: If changing from Out-of-District/Out-of-State to In-District/In-State, you MUST complete the Midland College Application for Residency Reclassification form. Completing this Change of Address does not automatically update your residency status for tuition purposes. Contact the Enrollment Services Office (enroll@midland.edu) for details.*

- Change of Telephone Number:**

Home Telephone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

- Change of personal E-mail Address:**

New e-mail address: \_\_\_\_\_

- Change of Emergency Contact:**

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

- Correction of Social Security Number:**

As it appears on file: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Correct Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

*\*Please note: Change of Social Security Number requires a copy of your Social Security card.*

- Name Change:**

From: \_\_\_\_\_ To: \_\_\_\_\_

*\*Please note: For a name change, you must provide a copy of your updated Social Security card.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please submit by:  
Fax: (432)685-6401

Mail: Midland College Student Records  
3600 N. Garfield  
Midland, TX 79705