

Request to Change Demographic Information Term: _____

A MARICOPA COMMUNITY COLLEGE **MISSIONS AND RECORDS** (RETURN THIS FORM IN-PERSON TO ADMISSIONS AND RECORDS. PLEASE REVIEW THE INFORMATION UPDATE GUIDELINES ON THE REVERSE OF THIS FORM, BEFORE SUBMITTING.) Student Name: Student ID #: **INFORMATION TO UPDATE:** (CHECK ONLY THE ITEMS THAT NEED TO BE CHANGED) OLegal Name: _____ OLegal Sex: Demale Male Intersex Other OSocial Security Number: ___ - __ - __ - __ _ _ _ O Gender Identity: ☐Woman ☐Man ☐Trans Female/Woman ☐Trans Male/Man ☐Gendergueer/Non-Conforming ☐Other Identity O Address: _____ Street Address O Phone Number: (______) - _____ O Email Address: O Previous Education: Signature: FOR A&R USE ONLY BY SIGNING THIS DOCUMENT, I AGREE THAT ALL INFORMATION PROVIDED IS TRUE AND CORRECT. I UNDERSTAND THAT ANY MISREPRESENTATION OR FALSIFICATION IS SUFFICIENT CAUSE FOR REVERSAL OF THIS REQUEST, CANCELLATION OF ENROLLMENT, ANDIOR OTHER DISCIPLINARY ACTION. ESTRELLA MOUNTAIN COMMUNITY COLLEGE Request to Change Demographic Information Term: _____ A MARICOPA COMMUNITY COLLEGE DMISSIONS AND RECORDS (RETURN THIS FORM IN-PERSON TO ADMISSIONS AND RECORDS. PLEASE REVIEW THE INFORMATION UPDATE GUIDELINES ON THE REVERSE OF THIS FORM, BEFORE SUBMITTING.) Student Name: ______ Student ID #: **INFORMATION TO UPDATE:** (CHECK ONLY THE ITEMS THAT NEED TO BE CHANGED) OLegal Name: _____ OLegal Sex: Demale Male Intersex Other OSocial Security Number: ___ - __ - __ - __ _ __ O Gender Identity: ☐Woman ☐Man ☐Trans Female/Woman ☐Trans Male/Man ☐Genderqueer/Non-Conforming ☐Other Identity O Address: O Phone Number: (______) - _____ O Email Address: O Previous Education:

BY SIGNING THIS DOCUMENT, I AGREE THAT ALL INFORMATION PROVIDED IS TRUE AND CORRECT. I UNDERSTAND THAT ANY MISREPRESENTATION OR FALSIFICATION IS SUFFICIENT CAUSE FOR REVERSAL OF THIS REQUEST, CANCELLATION OF ENROLLMENT, ANDIOR OTHER DISCIPLINARY ACTION.

FOR A&R USE ONLY

INFORMATION UPDATE GUIDELINES:

In order to request ANY update to your student record, you MUST provide:

■ Signed copy of the Request to Change Demographic information form AND ■ Photo Identification

In order to request an update to your LEGAL NAME, you must also provide a copy of at least two of the following:

 Current state/government issued ID (PRIMARY - Must have the correct and current name.)

Adoption Papers (SECONDARY)

 Marriage License (SECONDARY)

Court Order (SECONDARY)

Divorce Certificate or Decree

Certificate of Naturalization (SECONDARY)

In order to request an update to your SOCIAL SECURITY NUMBER, you must also provide the following:

Social Security Card (SIGNED)

In order to request an update to your LEGAL SEX, you must also provide a copy of at least one of the following: (The documentation submitted must match the change requested)

Current state/government issued ID

Current Birth Certificate

Current US Passport

Students with F1 or F2 visa status need to make any requests with our International Students Officer by emailing them at international.students@estrellamountain.edu for an appointment.

Estrella Mountain Community College reserves the right to request additional documentation at any time in order to complete your request. Requests to change demographic information cannot be completed by phone.

THIS FORM MUST BE SUBMITTED BY THE STUDENT IN PERSON TO THE ADMISSIONS AND RECORDS OFFICE. THIRD PARTY SUBMISSIONS WILL NOT BE ACCEPTED WITHOUT POWER OF ATTORNEY.

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