EVERGREEN VALLEY COLLEGE	Admissions & R			
VALLEY COLLEGE				ent a physical copy of
Student ID #	your Social Security Card and/or a valid ID, and allow us 7 to 10 business days to process your request.**			
Name				
Last	First		Middle	Date of Birth
Change Address:				
Street		City		_ <u>Z</u> ip Code
E-mail		Phone(	)	<u> </u>
Change Name: Former Name				
Last		First		Middle
Current Name				
Last		First		Middle
Change Social Security Number:				Duplicate Student ID:
Student MUST present a copy of original Social Security Card Incorrect Number :		Incorrect Number:		
Correct Number:		Correct Number:		

Signature \_\_\_\_\_\_

Change Major: