

STUDENT INFORMATION CHANGE FORM

_____/_____/_____/_____
LAST NAME FIRST MIDDLE STUDENT ID #

ADDRESS, PHONE NUMBER or E-MAIL CHANGE

NEW MAILING ADDRESS

Street Address City State Zip

NEW PHONE NUMBER(S)

_____/_____/_____
Home Phone Cell Phone Work/Other Phone

NEW PREFERRED E-MAIL ADDRESS

Your preferred e-mail address may be used for resetting your PIN on myGateway, obtaining your Banner ID number, and other official NOCE communication.

New E-mail Address _____

BIRTHDATE CHANGE

Valid ID displaying correct date of birth *or* birth certificate is required.

Correct Date of Birth: _____ Incorrect Date of Birth: _____

NAME CHANGE

Valid ID displaying new name or other proof of legal name change is required.

Correct Name: _____
Last First Middle

Incorrect Name: _____
Last First Middle

SOCIAL SECURITY NUMBER CHANGE

Presentation of your Social Security Card is required.

Correct Social Security Number: _____

STAFF USE ONLY

Incorrect Social Security Number: _____

GENDER

(CHANGE TO): Male Female

Please continue on other side

PROGRAM OF STUDY CHANGE

Old Program of Study: _____

New Program of Study (CHECK ONE):

- (3PSCEG) General – I’m interested in classes that do not lead to a completion of a program certificate.
- (3PESLG) English as a Second Language – I’m interested in classes to improve my English speaking, listening, and pronunciation skills.
- (3P38319) Administrative Professional Program
- (3P24176) Advanced Office Applications Program
- (3P39986) Braille Transcribing Program
- (3P38320) Business Information Worker I Program
- (3P24404) Early Childhood Education Program
- (3P37591) Electrical Technology
- (3P33698) Funeral Service Assistant Program
- (3P24414) Fundamental Computer Concepts & Skills Program
- (3P39625) GED/HiSet Preparation
- (3P32943) Graphic, Design and Web Skills Program
- (3P31595) High School Diploma Program
- (3P24114) Management Program
- (3P39944) Medical Assistant Certificate Program
- (3P24346) Office Applications Essentials Program
- (3P39947) Pharmacy Technician Registration Certificate Program
- (3P24128) Quality Assurance Management Certificate for Medical Devices

NOTICE:

Students currently enrolled at Cypress College or Fullerton College ***should not*** select a new Program of Study as the update to your student record will affect your appointment for registration and financial aid at the college.

Student Initials

North Orange Continuing Education has made every reasonable effort to provide a current listing of approved programs of study; however the programs offered and the courses scheduled are subject to change without notice by the North Orange Continuing Education Administration.

By signing your name on the signature line below, you are validating all of the information you have provided on this form to be true and accurate.

STUDENT’S SIGNATURE

TODAY’S DATE

OFFICE USE ONLY				
Type of ID:	Date Rec’d:	Accepted By:	Date Updated in Banner:	Updated By:
SPAIDEN: Is ADDRESS type “DM/CO”? NO <input type="checkbox"/> _ YES <input type="checkbox"/> (If yes to this question, keep a copy and send original to HR).				Original: Wilshire Updated 10/13/2020 v.2.0