Change of Student Data Form
Office of Academic Records

PO Box 139 | Dryden, NY 13053-0139 | Phone: 607.844.6500 | FAX: 607.844.6550 | Email: acadrec@tompkinscortland.edu

Please complete and return with appropriate documentation to the Enrollment Services Center, room 101 or fax with appropriate documentation to 607.844.6550.

Please print clearly!

Student’s Name (as entered in Tompkins Cortland Community College’s records) and ID:

____________________________________________________  __________________________
Last First MI Student ID

Check the item(s) below that should be changed in the College’s records and print the NEW information in the space(s) provided below:

NAME

____________________________________________________
Last First MI Former
(One of the following must be provided: marriage certificate, divorce decree, court order, passport, NYS driver’s license)

Note: A social security card is NOT proof of name change.
Note: The name on your social security card must match the name on your financial aid application to receive aid. If in doubt, please contact the financial aid office.

SOCIAL SECURITY NUMBER

________________________________________ - _______ - _____________
A copy of your social security card must be provided to change/correct social security number
Note: The name on your social security card must match the name on your financial aid application to receive aid. If in doubt, please contact the financial aid office.

DATE OF BIRTH

____________________________________________________
(One of the following must be provided: birth certificate, passport, NYS driver’s license)

GENDER

____________________________________________________
(One of the following must be provided: court order, passport, birth certificate, NYS driver’s license)

SIGNATURE ___________________________ DATE __________

Office Use only: Entered on ____________ Initial ________

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