ILLINOIS CENTRAL COLLEGE - CHANGE OF STUDENT INFORMATION

* If you need a change of name or social security number, submit this form with a copy of your driver's license/state ID **and** social security card reflecting the change(s) to Enrollment Services. A driver's license/state ID **and** marriage license are also acceptable for name changes.

THIS IS A CHANGE OF: Please check all that apply Name * Address Social Security Number *	I AM AN ILLINOIS CENT Check all that apply Student Employee	RAL COLLEGE	DOĖS N	ion of this form NOT constitute change of residency
Email				
Name		Student ID# (required)_		
Previous Name(s):				
Address				
City	County	Sta	te	Zip
Phone				_
Signature (required)			Date	
Revised April 2017				