CHANGE OF INFORMATION FORM

(Student, please submit completed form to the Admissions and Advising Center.)

This form is to be used solely for the purpose of updating name, social security number, and/or date of birth. You will be required to present an official ID for us to copy in order to make any changes to your information. View and update your address and/or phone numbers by accessing MyPVCC and the Student Information System.

Name: _____ Student ID #: _____

Please check only the option(s) that apply to you.

☐ **Name Change/Correction**

Former Name:_____
First Middle Last

New Name:_____
First Middle Last

Required Documents: Picture ID or marriage license.

☐ **Date of Birth Correction**

_____/_____/_____
MM DD YYYY

Required Documents: Picture ID or other official document with correct DOB.

☐ **Social Security Correction/ Addition**

_____- _____- _____

Required Documents: Social security card.

_____ _____
Student Signature Date

Rev. 10/10
Admissions and Advising Center

PVCC does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The following person has been designated to handle inquiries regarding nondiscrimination policies: Kim Van Savage, Chief Human Resources Officer, kvansavage@pvcc.edu, 434-961-6567, 501 College Drive, Charlottesville, VA 22902.

Admissions and Advising Center Use Only

Processed By: _____

Date: _____