Northwest State Community College

Student Information Change

Please have photo ID ready when submitting form to the Registrar's Office

Print Name _____ ID Number _____ Date _____

Student Signature _____

Complete Only Sections To Be Changed

Name Change -- a new ID card is $10 and paid in the Business Office:

Name changes require **legally supported documentation** (marriage license or other court documentation, please submit a **photocopy** with this form). Changes **will not** be made based on driver's license or social security card.

Old Name_____ New Name_____

Address Change -- update RAVE with any telephone number changes:

Street_____

City _____ State _____ Zip _____

Home Phone _____ Cell _____

Major Change:

_____ **OR** _____

New Two-year Degree New One-year Certificate

Catalog Year: _____ (Most current will be used unless you specify another.)

Academic Advisor Change: ___

Emergency Contact Name: _____ Relationship _____

Emergency Phone: Day _____ Evening _____

Office Use Only

Verified Identity: _____ **Driver's License** _____ **Student ID card** **Registrar's Office** _____ **Date** _____

Registrar's Office, Room C106
22600 State Route 34
Archbold OH 43502

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Fax 419-267-5604
registrar@northweststate.edu