## 3

## **ODESSA COLLEGE**

Records Office 201 W. University Odessa, TX 79764 Ph. 432.335.6404

## Change to Demographic & Contact Information

Odessa, TX 79764 Ph. 432.335.6404	
Fax 432.335.6303	
OC ID#	
Student Name: (Last)(List previous last name if you are changing your name) (First)	(Middle)
PLEASE LIST THE <u>CHANGES</u> OR <u>CORRECTION</u> TO BE M	IADE <u>ONLY</u> :
Social Security #:	
Name:	Is your address change:
Name:(Last)(List NEW last name for a name change) (First) (Middle)	Physical address only
Address:	Mailing address only
	Both physical & mail
Phone: () Cell Home Work Email:	
Student Signature: Date:_	
nange to your SS# must be accompanied by a copy of your SS card and government-issued photo npanied by supporting documentation, such as a marriage license or court order, and governmenter in your state or county of residence may have a significant impact on your tuition rate. If residency requirements in order to be eligible for in-state tuition rates. A request for reclassificating documentation prior to the census date for the semester in which you wish to be restricted and/or to another state, your residency status will be updated upon receipt of the new info	ent-issued photo ID. you move into the state of Texas, you m cation must be completed and submitt classified. If you move out of ECTOR
TURN IN TO WRANGLER EXPRE	SS
WRANGLER EXPRESS: Received by: DATE:	
RECORDS OFFICE ONLY: Processed by: DATE:	