

Student Information Update Form

scadmissions@saddleback.edu | 949-582-4555

28000 Marguerite Parkway Mission Viejo, CA 92692-3635 Office of Admissions and Records

Important: In order to make changes to your name, date of birth, social security number, or educational information, you must present legal documentation (i.e. marriage license, court order, passport, driver's license, social security card, official transcripts, diploma, official verification letter, etc.).

| Student's Name – Last, First, MI | | | Student ID Number | | |
|--|--|--------------------------------------|--------------------------|----------------------|--|
| Email Address | | | Telephone Number | | |
| SECTION A: | | | | | |
| Update Name To: | | | | | |
| Last: First: | | | MI: | | |
| Update Date of Birth To: | | Update Social Security Number To: | | | |
| SECTION B: College of Record Change | | | | | |
| I am requesting to change my col | ege of record to Saddleback College f | rom Irvine Valley College (|) Please initial. | | |
| Brief explanation for changing College | ge of Record: | | | | |
| Have you applied for Financial Aid Students receiving financial aid throu | through Irvine Valley College? ugh IVC may not change their college of the state of | YES NO ecord unless they receive a s | sign off from a SC Final | ncial Aid Officer: | |
| Signature of SC Financial Aid Office | r: Signature | Print Name | | | |
| | gram through Irvine Valley College? VC may not change their college of reco | YES NO d unless they receive a sign | off from a IVC EOPS C | Officer: | |
| Signature of IVC EOPS Officer: | of IVC EOPS Officer: Signature Print Name | | | | |
| | Jignature | T Till Name | | | |
| SECTION C: | | | | | |
| Major Change | | | | | |
| I would like to change my major to | o: | Effective Term | 1 | | |
| If unsure or undecided on ma | jor, please see an Academic Counselor for | assistance. The Office of A&R o | cannot advise students c | on selecting a major | |
| | | | | | |
| For office use only: | | | | | |
| Date Rec'd: | Rec'd By: | Updated in SIS: | Entered | Ву: | |
| | | | | | |

| STUDENT ID# | |
|-------------|--|
|-------------|--|

| SECTION D: | SECTION D: | | | | |
|--|---|--|--|--|--|
| Educational Status Change (Please check only or | ne.) | | | | |
| Earned a high school diploma* Special student currently enrolled in high school Not a high school graduate, enrolled in adult school Not a high school graduate Passed GED or received certificate* | Date: | | | | |
| SECTION E: | | | | | |
| Educational Goal Change (Please check only one | .) | | | | |
| 1. Prepare for a new career (acquire job skills) 2. Advance in current job/career (update job skills) 3. Discover/formulate career interests, plans, goals 5. Obtain a two-year associate degree without trans 6. Earn a career technical certificate without trans 8. Obtain an associate degree and transfer to a 4-y 9. Transfer to a 4-year institution without an associate linear and transfer to a 4-y 10. Maintain license * 11. Improve basic skills (English, Reading, Math) 12. Complete credits for HS diploma or GED 13. Educational Development * 14. Undecided on goal 15. To move from noncredit coursework to credit course and transfer to a 4-year college student taking courses to meet 4 *Educational Goals that do not require Matriculation: 1 **Eligible Educational Goals for Financial Aid (5, 6, 8, 9) | snsfer ** fer ** Major: year institution ** ciate degree ** coursework 4 year requirements* | | | | |
| By signing below, I understand that changing my edu Receive financial aid Receive a priority registration date Enroll in English, math, or in a course that re | ucational information may adversely affect my ability to: quires English or math as a pre-requisite. | | | | |
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