

ctcLink Identification Number (§	9 digits):			
This change is for: 🗌 Name 🗌				
*Addresses may also be changed online in ctcLink via the Student Homepage.				
If updating name, please select	reason: 🗌 Spelling Er	ror 🗌 Legal Ch	ange	
NAME CHANGE				
Previous name (currently in ct	cLink)			
Last name:	First name:		Middle initial:	
Updated name				
Last name:	First name:		Middle initial:	
<ul><li>All requests for a name change requested, the following support</li><li>Current Social Security car</li></ul>	ting documentation will	also be neede		
Legal documents support	ing name change. Ex.: N	Marriage Licens	se, Divorce Decree, Court Order, etc.	
I will bring required docume	nts to SCC, Building 15	during busines	s hours.	
Please contact me to set up	a Zoom meeting and co	ollect documen	tation remotely.	
Email:		Phone:		
Student's signature:			Date:	
MAILING ADDRESS CHANGE				
New address:				
City:	State:	Zip:	Phone:	
Student's signature:			Date:	
FOR OFFICE USE ONLY Please initial after each process	s has been completed.			
	Updated in c	tcLink		
Financial aid (Name Change Only)				
	IT Notified	(		