WASHTENAW COMMUNITY COLLEGE
STUDENT RECORDS OFFICE
P.O. Box D-1 Ann Arbor, MI 48106
734.973.3548
FAX 734.677.5408

STUDENT RECORDS USE ONLY
NOTES

TODAY'S DATE _____

EFFECTIVE SEMESTER _____

STAFF INITIALS

ADDRESS CHANGE FORM

NAME

LAST NAME , FIRST NAME MI

SOCIAL SECURITY NUMBER OR WCC ID NUMBER

___ - ___ - ____

_____

STUDENT'S SIGNATURE

ADDRESS CHANGE

TYPE OF CHANGE ____ Residence ____ Mailing ____ Billing

NOTE: ADDRESS CHANGES MAY AFFECT YOUR RESIDENCY STATUS AND TUITION RATE

OLD

NUMBER STREET APT

CITY STATE ZIP **COUNTY**

- -

TELEPHONE

NEW

NUMBER STREET APT

CITY STATE ZIP **COUNTY**

- -

TELEPHONE

HOW LONG AT THE NEW ADDRESS? _____