



STUDENT DATA CHANGE REQUEST

Use this form to update your Yuba College student information. Address and phone number can also be updated on YCCD Self-Service. Emailed forms must come from your YCCD student email. Forms sent from personal email accounts will not be accepted. Requests without required documentation will not be processed.

Current Name on File: _____ Student ID#: _____

Phone #: _____ Student Email: _____@go.yccd.edu

ONLY complete the sections to update:

Personal Information

Name: Legal Name (documentation required) Chosen/Preferred Name

Last: _____ First: _____ Middle: _____

Address: _____

City: _____ State: _____ Postal: _____

Phone Number: (_____) _____

Social Security Number (SSN): _____ - _____ - _____ (copy of SSN card is required)

Birth Date (MM/DD/YYYY): ____/____/____ (documentation required)

Academic Information

Add Program(s): _____

Remove Program(s): _____

Update Catalog Rights: _____ **for Program(s):** _____

Educational Goal: _____ (see options below)

- | | |
|---|---|
| A- Transfer to four-year college with an associate's degree | G- Learn job skills (new career) |
| B- Transfer to a four-year college without an associate's degree | H- Update current job skills |
| C- Earn a general education associate's degree, A.A. | I- Maintain certificate or license |
| D- Earn a vocational associate's degree, A.S. | J- Educational development |
| E- Earn a vocational certificate | K- Improve basic skills in reading, math, etc. |
| F- Explore career interests, plans and goals | L- Complete high school credit |

Student Signature: _____ Date: _____

OFFICE USE ONLY: Processed by: _____ Date: _____