

**Enrollment Services Change of Address/Telephone Number Form**

**My current record is listed as follows:**

Name: \_\_\_\_\_ (please print)

Student ID #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Enrollment Status: ( ) Currently enrolled student ( ) New applicant ( ) Former student seeking re-entry

First Semester at GTCC: \_\_\_\_\_ Anticipated Graduation Date: \_\_\_\_\_

Former Address: (Must list old address for identification) \_\_\_\_\_

**Please make the following change(s) to my record:**

( ) My address has changed to: \_\_\_\_\_  
Street

\_\_\_\_\_  
City, State, Zip Code

( ) My telephone number has changed to:

Home: \_\_\_\_\_ Business: \_\_\_\_\_

Cell: \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**Note:**

**Must use another form for: Name Changes; Changes of Curriculum/Program; OR to Request a Residence Status Change**