

Northern Maine Community College

Change Of Address/Name Form



Student Information

Student Name _____

Student Social Security Number _____

Date of Change _____

Old Address

Street Address _____

City _____ State _____ Zip Code _____

Phone Number _____

New Address

Street Address _____

City _____ State _____ Zip Code _____

Phone Number _____

Name Change

Old Name _____

New Name _____

(need to show proof of name change: marriage certificate, social security card, drivers license, etc)