



Student Records Change Form

DSLCC – Student Services
1000 Dabney Drive ▪ Clifton Forge, VA 24422
Phone: 540-863-2820 ▪ Fax: 540-863-2915

Name: _____ Empl ID: _____

Change of: Address Phone Name Date of Birth SSN

(Please complete only the area(s) below that need to be changed)

Address

Mailing Address: _____

_____ City _____ State _____ Zip

City or County (where your reside): _____

Phone Numbers: _____

Home Mobile Business

*** Changes To: Name, Date of Birth, and Social Security Number ***

Require a legal or government issued photo id (Ex: driver's license or passport). If you do not have a valid ID, we must have a copy of signed social security card, divorce decree, marriage certificate, birth certificate or other court issued documents. Copies of certifying documents listed above must be stapled to this form.

Legal Name

Previous Name: _____ / _____ / _____
Last First Middle

New Name: _____ / _____ / _____
Last First Middle

Date of Birth Correction

Previous DOB: _____ / _____ / _____ Correct DOB: _____ / _____ / _____

Social Security Number Correction

Previous SS#: _____ / _____ / _____ Correct SS#: _____ / _____ / _____

Student Signature: _____ Date: _____

Student Services Office Use Only

IDs/Documents Verified Corrected in SIS

Staff Initials: _____ Date Entered: _____