



**NORTHWESTERN CONNECTICUT COMMUNITY COLLEGE
RECORDS OFFICE
Park Place East, Winsted, CT 06098**

CHANGE OF NAME, ADDRESS and/or EMAIL

Please print neatly. Change of name requires a Certified copy of a marriage license, court order, or dissolution degree reflecting your new name in full.

Student ID @ _____ SSN _____

Present Name on College Records _____
(First Name) (M.I.) (Last Name)

Change Name To: _____
(First Name) (M.I.) (Last Name)

Change Address To: _____

Home Phone Number (____) _____ Work Phone Number (____) _____

Cell Phone Number (____) _____

New Email Address _____

Student Signature: _____ Date: _____

**PLEASE RETURN THIS FORM TO THE RECORD'S OFFICE AT
Green Woods Hall room 215
WINSTED, CT 06098
(860) 738-6314**

FOR OFFICIAL USE ONLY:

Date Received: _____ Date Entered: _____ By: _____