

RECORDS CHANGE FORM

21250 Stevens Creek Blvd. Cupertino, CA 95014 FAX 408.864.8329

(X) Check all that apply

Name Change Social Security Number Change

Social Security	y Number Change		
Required Inform	nation: Provide a	s it <u>currently appears</u> o	on your De Anza record
CWID/SID:			
Name:	t	First	MI
Change Request	t: Provide <u>ONLY</u>	the information that yo	ou want changed
CWID/SID:			
Name:			
Las	t	First	MI
		nts to webregda@deanza.ed	u act information and signature
	-	•	Ü
Phone: Email Address:			
Student Signatur	re	Da	ite
FOR	R OFFICIAL USE O	ONLY – ADMISSIONS & R	ECORDS STAFF
Completed by:	Date:	Notified (In-po	erson, Email, Phone):