



**STUDENT CHANGE OF INFORMATION FORM**

Name \_\_\_\_\_ Student ID# \_\_\_\_\_

**Print all new information below**

Address \_\_\_\_\_

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

Phone Number \_\_\_\_\_

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

**If name change:**

Former Legal Name: \_\_\_\_\_

Legal documentation of the name change needs to be provided at the time of request. Legal documentation is one of the following: a court order, marriage certificate, divorce decree, or birth certificate. A driver's license, voter registration card, social security card, etc., will **not** be considered legal documentation for name change request purposes.

Riverland is asking you to provide information that includes private and/or confidential information under state and federal law. Riverland is asking for this information in order to process this form. You are not legally required to provide the information we are requesting; however, the college may not be able to effectively process this form without it.

Please print and mail to: Registrar's Office  
Attn: Kelly Downey  
Riverland Community College  
1900 8 th Avenue NW  
Austin, MN 55912  
507-433-0520  
Fax: 507-433-0515