YORK COUNTY COMMUNITY COLLEGE

Change of Address/Change of Name Form

Please return this form to YCCC Records & Registration
Email: enrollmentservices@yccc.edu
Fax: (207) 641-0837
Mail: 112 College Drive, Wells, ME 04090

_____

Last Name First Name M.I.

Change Address to:

_____

Street (provide apartment or unit # if applicable)

_____

City *State* *Zip Code*

Change Phone Number to:

□ **Home** □ **Cell** _____

(Please include area code)

Change of Name:

Legal documentation required to make change: divorce decree, marriage certificate, adoption or name change paperwork issued by Court.

Please check the reason(s) for change below:

☐ Divorce ☐ Marriage ☐ Adoption ☐ Legal Name Change with Court

From: _____

Last *First* *M.I.*

To: _____

Last *First* *M.I.*

For Office use:

☐ Updated in EX ☐ Updated file in FERPA
☐ Notified Financial Aid ☐ Notified Tech Support to update accounts