

JOHNSON COUNTY COMMUNITY COLLEGE NAME/ADDRESS CHANGE REQUEST



Please Print

Return form to the 2nd floor, Student Center, or fax to (913) 469-2524.

JCCC ID _____ Date of Birth _____

Check the category that applies: JCCC Student JCCC Employee JCCC Student and JCCC Employee

Name in JCCC Records _____

Last

First

Middle

NAME CHANGE

Old Name _____
Last First Middle

New Name _____
Last First Middle

Students – Provide legal documentation for a name change, i.e., marriage license or Social Security card.

Personal e-mail address you want your new username and password sent to: _____
(This will be the only communication sent to this address – all official JCCC e-mail is sent to your student account.)

Employees – Take this form to Human Resources, GEB 274. A Social Security card showing your new name is required. As a JCCC employee, your username and email address will be changed to reflect your name change. You will continue to receive email messages to the former email address.

ADDRESS/PHONE NUMBER CHANGE

New Address:

Street Address/Apt No./Box Number (Students using box numbers for mailing must also include street address for determining residency)

City _____ State _____ ZIP _____ County _____

Primary Phone _____ Date of Occupancy _____
Month Day Year

Johnson County Community College notifies students and staff of campus emergencies by calling or texting the primary phone number on record. This service is used in extreme cases, such as inclement weather approaching or an active shooter on campus.

Old Address:

Street Address/Apt No./Box Number (Students using box numbers for mailing must also include street address for determining residency)

City _____ State _____ ZIP _____ County _____

Date of Occupancy _____
Month Day Year

Students — Please check one (for students under 24):

- Living with parents, dependent on parent's tax return
 - Living with parents, independent
 - Not living with parents, dependent on parent's tax return
 - Independent adult, since _____
- In what Kansas county do parents reside? _____

Employees – Do you want your home address and telephone number published in the Staff Directory? Yes No

Signature _____ Date _____

JCCC Rec'd Stamp