



*(Check all that apply)*

**CHANGE OF NAME** \_\_\_\_\_

**CHANGE OF ADDRESS** \_\_\_\_\_

**CHANGE OF MAJOR** \_\_\_\_\_

**CHANGE OF ADVISOR** \_\_\_\_\_

Student Identification Number \_\_\_\_\_

Student's Name \_\_\_\_\_

|      |       |        |        |
|------|-------|--------|--------|
| Last | First | Middle | Maiden |
|------|-------|--------|--------|

Former Name \_\_\_\_\_

|      |       |        |        |
|------|-------|--------|--------|
| Last | First | Middle | Maiden |
|------|-------|--------|--------|

New Address \_\_\_\_\_

|                     |      |       |     |        |
|---------------------|------|-------|-----|--------|
| Street No./P.O. Box | City | State | Zip | County |
|---------------------|------|-------|-----|--------|

New Telephone # (     ) \_\_\_\_\_

New Major \_\_\_\_\_

New Advisor \_\_\_\_\_

Student's Signature \_\_\_\_\_

Date Completed \_\_\_\_\_

FOR ADMISSIONS OFFICE USE:

Initials \_\_\_\_\_

Date Completed \_\_\_\_\_

**Where Excellence Counts**

**Shoals Campus**  
P.O. Box 2545J  
Muscle Shoals, AL 35662  
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Fax 256/331-5366

**Phil Campbell Campus**  
2080 College Road  
Phil Campbell, AL 35581  
256/331-6219  
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