

McDowell Technical Community College

Name, Address and/or Phone number change form

****COMPLETE and SUBMIT to Breanna Rose or Jill Hensley****

DATE: _____

***Current Name** (Last First
Middle/Maiden): _____

Former Name (Last First
Middle/Maiden): _____

Current Address: _____

Former Address: _____

Current Phone Number: _____

***If name change: Copy of social security card is required with form.**