



# Student Update Information Request

## PLEASE COMPLETE AND PROVIDE REQUIRED DOCUMENTATION

- Current students updating their address must provide proof of residency (acceptable documents can be found on [oaklandcc.edu/admissions/residency](http://oaklandcc.edu/admissions/residency)). Valid government ID required with form for changes to be processed.
- Documentation must be provided for any name change to be processed (driver's license, Social Security Card, or court documents).
- Military affiliation: provide appropriate valid ID or DD214 to document active duty, veteran or spouse/dependent status.

**REQUIRED INFORMATION**

OCC Student ID Number \_\_\_\_\_ Birth Date (MM/DD/YYYY) \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Former Name (if applicable) \_\_\_\_\_

Are you an F-1 student?    Yes    No

**STUDENT INFORMATION**

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Secondary Email \_\_\_\_\_

Phone Number    Home    Cell (\_\_\_\_\_) \_\_\_\_\_    Phone Number    Home    Cell (\_\_\_\_\_) \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Contact Phone Number (\_\_\_\_\_) \_\_\_\_\_

Correct Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Campus (check one)    Auburn Hills    Highland Lakes    Orchard Ridge    Royal Oak    Southfield

**MILITARY AFFILIATION (CHECK ALL THAT APPLY)**

<input type="checkbox"/> Veteran	<input type="checkbox"/> Active Duty	<input type="checkbox"/> Reservist	<input type="checkbox"/> National Guard			
<input type="checkbox"/> Current spouse or dependent of	<input type="checkbox"/> Veteran	<input type="checkbox"/> Active Duty	<input type="checkbox"/> Reservist/Guard			
<input type="checkbox"/> Veteran's Branch of Service	<input type="checkbox"/> Air Force	<input type="checkbox"/> Army	<input type="checkbox"/> Coast Guard	<input type="checkbox"/> Marines	<input type="checkbox"/> National Guard	<input type="checkbox"/> Navy

**PROGRAM OF STUDY INFORMATION**

Students may have up to two active programs of study on record. If assistance is needed in determining, changing, or updating a Program of Study, contact the Student Services Office at one of the five campus locations.

Program of Study code (example: BUS.ABA, CRJ.GEN.AAS) \_\_\_\_\_ Catalog Year \_\_\_\_\_

I no longer wish to pursue the following Program(s) of Study: \_\_\_\_\_

**SIGNATURE**

**Student signature and date are mandatory.**

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

**This form can be mailed to the address below or emailed to [ces@oaklandcc.edu](mailto:ces@oaklandcc.edu).**  
 Oakland Community College • Auburn Hills Campus, Building K • 2900 Featherstone Road • Auburn Hills, MI 48326-2845  
 To deliver in person, take this form to the Enrollment Services Office at one of the five campus locations.  
 (For campus locations, go to [oaklandcc.edu/campuses/default.aspx](http://oaklandcc.edu/campuses/default.aspx))

**FOR OFFICE USE ONLY**

Date Processed \_\_\_\_\_ By \_\_\_\_\_

Comments \_\_\_\_\_

**Please Alert International Student Services of any F-1 Student Changes.**