

## **Change of Information**

COLLEGE BST. 1947	Palomino ID					
Last Name		First Name		MI	Date of Birth  DD YYYY	
To update your personal information, submit form and support	rting documents (if	applicable) to the Office	ce of Admissions or t	the Office of	the Registrar for processing.	
Change of Enrollment Term (select ye	our new entry te	rm)				
Fall 20 Spring 20	Su	Summer I 20		Summer II 20		
Change of Program/Major (complete of	nly fields that n	eed to be updated)				
New Program New		Major		New Concentration		
Contact Information (complete only fields	that need to be	updated)				
Street Address						
City		e	Country	Zip Co	Zip Code	
Email Address		Telephone/Cell Phone			Check here to authorize Laredo College to text you important	
Emergency Contact (complete only fields	that need to be u	pdated)			updates/information.	
Last Name	Fi	rst Name & Midd	Relationship			
Street Address	I					
City		C	Country	Zip Cod	Zip Code	
Email Address	Telephone/Cell Phone					
Legal Changes (requires a government-issue	ed identification	or additonal suppor	rting documents)			
Last Name		First Name		Middle Name		
SSN		DOB				
Student Signature Date		Processed by			Date	
		ee Use Only:				
Marriage Certificate Official	Govt. ID	SSN Card	Passpo	rt	Other:	