

Personal Information Change Form Minnesota North College

Minnesota North College Records Office 1515 East 25th Street Hibbing, MN 55746 Phone (Local): 218.293.6850

Phone (Local): 218.293.6850 Phone (Toll free): 888.223.8068

Student Name:		Student Star ID:			
When a name or social security n reviewed prior to making the change. more of the following: US Passport, Docard or Draft Record.	Proof of A	authenticity includes a pictu	ire ID, which may	/ include any one or	
		AND			
One additional form of documentation Divorce Decree, Court Order, Drivers or Birth Certificate.					
*Please bring required documents to originals, photocopies will not be acce		rds Office, when submitting	g this form. All o	documents must be	
NAME CHANGE:					
Former First Name Form		Former Middle Name Fo		Former Last Name	
New First Name	t Name New Middle Name		New Last Name		
SOCIAL SECURITY CHANGE:					
My correct Social Security Numbe	r is:	-			
ADDRESS CHANGE:					
This address change is for my (cire	cle): Pern	nanent address Lo	cal address		
Old Address		Old City	Old ST	Old Zip Code	
New Address		New City	New ST	New Zip Code	
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OFFICE USE ONLY		stanniad Olympid	_	Nata.	
I verify that original documents were vie Changes made in ISRS by:	ewed and ph	otocopied. Signed: Date:		vate:	
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