

ODESSA COLLEGE

Change to Demographic & Contact Information

Records Office 201 W. University Odessa, TX 79764 Ph. 432.335.6404

Odessa, TX 79764 Ph. 432.335.6404 Fax 432.335.6303 Records@odessa.edu		
Fax 432.335.6303 Records@odessa.edu		
OC ID#		
Student Name:(Last)(List previous last name if you are cha	anging your name) (First) (Middle)	
PLEASE LIST <u>ONLY</u> THE <u>CHANGES</u> O	R <u>CORRECTIONS</u> TO BE MADE	: :
Social Security #:(ONLY if changed)	
Name:	<u>Is your ad</u>	dress change:
Name:(Last)(List NEW last name for a name change) (Fin		
Address:	Apartment # Mailin	ng address only
City:State:	Both p	ohysical & maili
Phone: () Cell		
Email:		
Student Signature:	Date:	
ange to your SS# must be accompanied by a copy of your SS card panied by supporting documentation, such as a marriage licens		
submit SS card showing changed name in addition to above docu		carrent students
ange in your state or county of residence may have a significant residency requirements in order to be eligible for in-state tuition upporting documentation prior to the census date for the semes TY and/or to another state, your residency status will be update	n rates. A request for reclassification must be comp ster in which you wish to be reclassified. If you mov	oleted and submitte
TURN IN TO WR	ANGLER EXPRESS	
WRANGLER EXPRESS: Received by:	DATE:	
RECORDS OFFICE ONLY: Processed by:	DATE:	