Danville Area Community College

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Address, Name, Social Security Number Change Form

Admissions & Records (Students): 217.443.8800
Human Resources (Employees): 217.443.8757
2000 E. Main Street
Danville, IL 61832

Please Print Clearly:

Name: _____ Date: _____
Last First Middle

Student or Colleague ID#: _____ Birthdate: _____

Please Change Danville Area Community College records to reflect my new/corrected:

☐ Address (Go to Box A) ☐ Name (Go to Box B) ☐ Social Security Number (Go to Box C)

Box A: Address Change

New Address:

_____ _____
Street Address Telephone

_____ _____ _____
City State Zip

Box B: Name Change

Legal Documentation required: Marriage Certificate, a Court Order, or a Dissolution Decree certifying the name change, and a picture ID. A change of name must be completed with the Social Security Administration prior to changing a name with Danville Area Community College. A copy of the new Social Security card must accompany this form. Employees: New W4's are also required for a name change.

Former Name

_____
Last First Middle

New Name

_____
Last First Middle

Box C: Social Security Number Change

If you social security number is incorrect you must provide a signed social security card as well as a photo ID. Please bring a photo copy of one of these documents, a copy of a photo ID, address, name, social security card, and this form completed to the Admissions Office (for students) or the Human Resources Office (for employees).

Former/Incorrect Social Security Number

_____

New/Corrected Social Security Number:

_____