

**DEMOGRAPHIC INFORMATION CHANGE FORM**

Please print clearly

AACC ID#        

College Use:

Processed by \_\_\_\_\_

Date \_\_\_\_\_

FULL NAME ON FILE: (see below for name changes)

Last Name

First Name

M.I.

ADDRESS:

Street

City

State

Zip Code

STARTING DATE AT ABOVE ADDRESS:

MM/DD/YY

PHONE:

 Home  Cell

PHONE:

 Home  Cell

HOME EMAIL ADDRESS:

EMERGENCY CONTACT:

Contact Name

Contact Phone Number

**Name Changes**

Proof of name change is required. You must submit an official court document, marriage certificate, or certificate of naturalization. Driver's licenses are considered acceptable for last name changes only. (MyAACC user name is not changed based on name change.)

NAME CHANGE:

Last Name

First Name

M.I.

**Student Signature (Required)**

I have read and understand the following:

- ✓ To be considered for in-county tuition, I must reside in Anne Arundel County three months prior to the beginning of the term for which I register. I may be required to submit a Residency Petition form if I have moved from out-of-county or out-of-state to Anne Arundel County.
- ✓ I must submit a Residency Petition Form if I wish to use a Post Office Box (PO Box) address.
- ✓ I certify that the information provided on this form is accurate and complete.

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

Notice of Nondiscrimination: AACC is an equal opportunity, affirmative action, Title IX, ADA Title 504 compliant institution. Call Disability Support Services, 410-777-2306 or Maryland Relay 711, 72 hours in advance to request most accommodations. Requests for sign language interpreters, alternative format books or assistive technology require 30 days' notice. For information on AACC's compliance and complaints concerning sexual assault, sexual misconduct, discrimination or harassment, contact the federal compliance officer and Title IX coordinator at 410-777-1239, [complianceofficer@aacc.edu](mailto:complianceofficer@aacc.edu) or Maryland Relay 711.