

Student Update

(Please Complete This Form In Its Entirety)

- Current students updating their address must provide proof of residency (acceptable documents can be found on www.macomb.edu).
- Documentation must be provided for any name change to be processed (driver's license or court documents).

I plan to enroll starting:

Fall 20_____(Aug—Dec) Winter 20_____(Jan—May) Summer 20_____(May—Aug)

STUDENT INFORMATION

Macomb User ID _____			Birthdate _____ <small>MM/DD/YYYY</small>			Last 4 digits of Social Security No. _____		
LAST NAME			FIRST NAME			MIDDLE NAME		
FORMER LAST NAME (IF APPLICABLE)								
STREET ADDRESS								
CITY			STATE			ZIP		
EMAIL ADDRESS				AREA CODE & PHONE NUMBER				
EMERGENCY CONTACT NAME				EMERGENCY CONTACT AREA CODE & PHONE NUMBER				
Military Affiliation (check all that currently apply)								
<input type="checkbox"/> Veteran <input type="checkbox"/> Active Duty <input type="checkbox"/> Reservist <input type="checkbox"/> National Guard Current Spouse/Child of <input type="checkbox"/> Veteran <input type="checkbox"/> Guard/Reservist <input type="checkbox"/> Active Duty								
Branch: <input type="checkbox"/> Air Force <input type="checkbox"/> Army <input type="checkbox"/> Coast Guard <input type="checkbox"/> Marines <input type="checkbox"/> Navy <input type="checkbox"/> Unknown Are you an F-1 Student <input type="checkbox"/> Yes <input type="checkbox"/> No								

PROGRAM CHANGE INFORMATION

Students needing assistance in determining, changing or updating a program of study should contact the Counseling & Advising Office at Center Campus, H 103 or South Campus, G 370, 586.445.7999.	
	<input type="checkbox"/> Degree <input type="checkbox"/> Certificate <input type="checkbox"/> Skill Specific Certificate
Program of Study (ex: Accounting, Culinary, etc) _____	<input type="checkbox"/> Guest Student from another college

Signature (student signature is mandatory)	Date

This form can be mailed/faxed/scanned and emailed or delivered in person to either campus.

South Campus:	Center Campus:
G Building, Room 224 14500 E. 12 Mile Road Warren, MI 48088-3896 (P): 586.445.7999 (F): 586.445.7140	G Building, Room 110 44575 Garfield Road Clinton Township, MI 48038-1139 (P): 586.445.7999 (F): 586.226.4787

records@macomb.edu