

Print out this form and bring or mail it in to Registration, or Fax to 708-225-5806.
You **must** include a copy of proper identification as listed below.



South Suburban College of Cook County
CHANGE OF ADDRESS

_____ - _____ - _____
Student ID Number
_____ Summer _____ Fall _____ Spring

Last Name First Name Middle
() ()
Home Phone Number Alternate Phone

NEW ADDRESS

Street Address City State Zip Code

PREVIOUS ADDRESS

Street Address City State Zip Code

I hereby certify to the best of my knowledge the information furnished is true and complete. Employees of the college are required to file a separate change form in personnel.

Student's Signature

The current proof of residency must be furnished at the time this form is completed and processed by Registration. Evidence of district residency shall be based on ownership and/or occupancy of a dwelling in the district and at least one of the following:

IN THE STUDENT'S NAME:

1. Driver's License/ State ID
2. Voter's Registration Card
3. Current (up to 30 days) Utility Bill (gas, electric, water)
4. Automobile License Registration Card
5. Other Non-Self Serving Documentation (mortgage, property tax bill, lease)

10/05

Date

RETURN TO: Office of Registration at South Suburban College
15800 S. State Street
South Holland, IL 60473

Verification: OFFICE USE ONLY [] UCC [] MAIN

License# _____

EXP. Date _____

Other _____

Approval _____