

### Authorization for Change of Biographic Data

***Note:** Changing an address does not necessarily qualify an individual for a tuition/fee rate change. State law requires proof of residency in Texas/Bee County for the 12-month, period immediately preceding the date of registration at Coastal Bend College to be eligible for in-state/in-district rates.*

Name \_\_\_\_\_  
Last First Middle

Social Security Number: \_\_\_\_\_ CBC ID #: \_\_\_\_\_

**Change of Address/Telephone**

Old Home Address: \_\_\_\_\_ Current Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Old Phone #: ( ) \_\_\_\_\_ New Phone #: ( ) \_\_\_\_\_

**Change of Name: (Please attach proper documentation) (Copy of Marriage Certificate or Divorce Decree)**

Name before change: \_\_\_\_\_

Name after change: \_\_\_\_\_

**Change of Social Security Number (Please attach copy of Social Security Card.)**

Correct Social Security Number: \_\_\_\_\_

Social Security Number in Computer: \_\_\_\_\_

*I authorize each of the changes shown above.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

**FOR OFFICE USE ONLY**

Date address or phone number changed in computer: \_\_\_\_\_ by: \_\_\_\_\_

Date name was changed in computer: \_\_\_\_\_ by: \_\_\_\_\_

Date Social Security Number changed: \_\_\_\_\_ by: \_\_\_\_\_

*Coastal Bend College does not discriminate on the basis of race, creed, color, national origin, gender, age, or disability.*