Santa Barbara City College
Admissions & Records

Student Data Change Form

Current Information on Records:

_____ _____ _____
LAST Name FIRST Name MI

SBCC ID K __ __ __ __ __ __ __ __

Phone _____ Pipeline email _____@pipeline.sbcc.edu

☑ **New Information – Complete ONLY what needs to be changed.**

☐ **New Name**

_____ _____ _____
LAST Name **FIRST Name** (15 character limit) **Middle**

*A copy of a legal document of your name change **MUST** be attached for processing (Driver license, passport, marriage license, etc.)

☐ **Preferred First Name:** _____

☐ **Remove Preferred Name:** _____

☐ **Legal Sex change to:** _____

☐ **New Social Security Number** ___ ___ ___ / ____ ___ / ___ ___ ___ ___

*A copy of your social security card **MUST** be attached for processing.

☐ **Birth Date Correction** _____
Month **Day** **Year**

*A copy of a legal document of your date of birth **MUST** be attached for processing (Driver license, passport, birth certificate, etc.)

Requests will be processed within 5-7 business days and in the order in which they are received.

Student Signature X _____ **Date**_____

Picture ID is required when submitting form via mail or in-person.

FOR OFFICE USE ONLY **Comment:** _____

☐ **SCAN** ID Checked _____ Entered by _____

Staff Initials _____ Date _____