

PERSONAL INFORMATION UPDATE



This signed form may be returned by one of the following options:

- In Person: take to any registration site at Hillsboro or Arnold (bring photo ID)
- Mail: Office of Registration & Student Records, Jefferson College, 1000 Viking Drive, Hillsboro, MO 63050
- Jeffco E-mail: send to register@jeffco.edu along with a copy of your photo ID

☐ **(Required) Your Information:**

First Name/Preferred Name on File	Middle Name	Last Name
Previous Last Name (if applicable)	Date of Birth	Student Number
		V#

☐ **Permanent Address:** (where you intend to reside or intent to return, used for determining tuition rates)

Street	City	State	Zip

☐ Please check this box if this is the same as your mailing address - if different, fill in Mailing Address.

☐ **Mailing Address:** (where you want your mail or packages to go)

Street	City	State	Zip

☐ **New Telephone Number:**

Phone Number	Please note: Users must opt out via MyJeffco/Quicklinks/Viking Text Messaging page by clicking "opt out" within the Viking Text Message Service notification application, then "opt in" with the new information.

☐ **Name Change:**

Change From	Change To
Preferred First Name Only	

***Required documentation:** present a completed **Personal Information Update** form and one of the following items to verify name change to the Office of Registration & Student Records: Driver's license, Social Security card, court order, and/or passport.

☐ **Emergency Contact:**

Emergency Contact Name	Relation to Student	Phone Number

☐ **Student Signature:**

Student Signature	Date
X	

For Office Use Only:

Campus: Hillsboro Arnold Received_____ Completed_____ Date:_____ Initials:_____