

The following form(s) can be filled in on-line, then printed for signatures and mailing or faxing.

To begin filling out the forms in Acrobat Reader, make sure the **hand** tool is selected then click on a line or in a box and begin typing. Check boxes can be clicked on or off.



SCC Financial Aid Office ADDRESS CHANGE

Student's name _____
First name MI Last name

Student ID number _____ - _____ - _____ Social Security number _____ - _____ - _____

New address _____ Apartment number _____

City _____ State _____ ZIP _____

New phone (_____) _____

Student's signature _____ Date _____