NCTC

RECORDS MAINTENANCE FORM

REGISTRAR'S OFFICE * NORTH CENTRAL TEXAS COLLEGE * 1525 W. CALIFORNIA * GAINESVILLE, TX 76240 * 940-668-4222

(Please print legibly)

Name _____ **SS#:** _____-_____-_____

I. Complete this portion to correct NAME, SOCIAL SECURITY NUMBER, BIRTHDATE or ADDRESS

Incorrect

SOCIAL SECURITY NUMBER

BIRTHDATE _____
MONTH DAY YEAR

NAME _____
LAST FIRST MI

ADDRESS _____

CITY _____COUNTY_____

STATE _____ZIP_____

TELEPHONE _____

Correct

SOCIAL SECURITY NUMBER

BIRTHDATE _____
MONTH DAY YEAR

NAME _____
LAST FIRST MI

ADDRESS _____

CITY _____COUNTY_____

STATE _____ZIP_____

TELEPHONE _____

SEMESTER LAST ENROLLED (CHECK ONE): ☐ FALL ____ ☐ SPRING ____ ☐ SUMMER I _____ ☐ SUMMER II _____
YEAR YEAR YEAR YEAR

II. Complete this portion to change ADVISOR or MAJOR

Change: ☐ MAOR ☐ ADVISOR

Old Major: _____ New Major: _____

Assigned Advisor: _____ Selected Advisor: _____

Transfer Work From: _____

Degree Audit Needed: ___ YES ___ NO

III. Complete this portion for CHANGE of EDUCATIONAL INTENT

Please change my educational intent for enrolling at NCTC to:

☐ 5 for a one-year certificate in _____
(Note: One term certificates in EMT-Basic, EMT-Paramedic, Computer-Aided Manufacturing, or Tech-Prep Programs are NOT eligible for Pell grant assistance.)

☐ 6 for a two-year associate degree or two-year certificate in _____

☐ 7 for transfer work toward a bachelor's degree in _____

I understand that the regulations for Federal Title IV student assistance require admission to the college for one of the above educational intents to be eligible for Financial Aid.

STUDENT SIGNATURE _____ **DATE** _____

***Request for change will not be processed without student signature**.