

San Jacinto Campus  
1499 N. State Street  
San Jacinto, CA 92583  
(951) 487-3215  
Fax: (951) 654-6738

Menifee Valley Campus  
28237 La Piedra Rd.  
Menifee, CA 92584  
(951) 639-5215  
Fax: (951) 672-6548

Temecula Valley Campus  
41888 Motor Car Parkway  
Temecula, CA 92591  
(951) 639-5205

San Geronio Pass Campus  
3144 W. Westward Ave.  
Banning, CA 92220  
(951) 922-1327  
Fax: (951) 922-1408

MSJC Student ID#: \_\_\_\_\_ Term: \_\_\_\_\_ Year: \_\_\_\_\_

Student Name: \_\_\_\_\_  
Last First MI

**ADD or CORRECT SOCIAL SECURITY NUMBER:**

Add SS#: \_\_\_\_\_

Incorrect SS#: \_\_\_\_\_ Correct SS#: \_\_\_\_\_

**You MUST present in person your official Social Security card to add or correct your Social Security number.**

**CHANGE or CORRECT NAME:**

Current Name: \_\_\_\_\_  
Last First MI

Previous Name: \_\_\_\_\_  
Last First MI

**You MUST present CA driver's license, marriage certificate, birth certificate or any other legal document to change or correct your name on record.**

**CORRECT DATE OF BIRTH:**

Incorrect DOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Correct DOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MM DD YY MM DD YY

**You MUST present in person CA driver's license, birth certificate or any other legal document.**

**CHANGE or CORRECT GENDER:**

Female  Male

**PERSONAL EMAIL CHANGE or CORRECTION (for purposes of password reset only):**

Incorrect Email: \_\_\_\_\_

Correct Email: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Office Use ONLY**

Date: \_\_\_\_\_

Processed by: \_\_\_\_\_

**CHANGES COMPLETED (Mark all that apply):**

Social Security Number  Gender

Name  Email

Date of Birth