



HUDSON COUNTY COMMUNITY COLLEGE

Hudson County Community College
Enrollment Services – 70 Sip Avenue, Main Floor
Registrar Request Form

First Name: Last: MI: Student ID:

Current Address: Street: Apt:

City: State: ZIP: Current Daytime Phone:

I am Requesting / Reporting:

Complete appropriate sections in full – print clearly to ensure prompt and accurate service

A - CHANGE OF ADDRESS - Proof may be required. Have supporting documentation available. Change of address for billing purposes cannot be applied retroactively.

OLD ADDRESS: STREET: APT:

CITY: STATE: ZIP:

B VERIFICATION OF ENROLLMENT – DO NOT SUBMIT – FOLLOW DIRECTIONS BELOW

The Office of the Registrar is no longer printing verification of enrollment letters. To obtain a verification of enrollment students, employers and background screening firms must make requests through the National Student Clearinghouse.

Students should place a phone call to (201) 360-4148 for instructions. To contact the Clearinghouse, you may send an e-mail to degreeverify@studentclearinghouse.org or via fax at (703) 318-4058.

Students and interested persons should visit the National Student Clearinghouse web site at www.studentclearinghouse.org or call the Clearinghouse at (703) 742-4200.

C - CHANGE OF TELEPHONE

OLD PHONE NUMBER:

D - CHANGE OF SOCIAL SECURITY NUMBER – Must present Social Security card

INVALID SSN VALID SSN

E - CHANGE OF NAME – Must present legal documentation to verify

NAME IN SYSTEM: First Name: Last: MI:

NAME CHANGE: First Name: Last: MI:

Student's Signature: Date of Request: