



Enrollment Services Office  
enrollment@mtech.edu

## CHANGE OF INFORMATION FORM

Please provide the following information to update your records. Return completed form to Enrollment Services Office or enrollment@mtech.edu.

IF YOU WANT TO UPDATE YOUR EMAIL ADDRESS CONTACT I.T. HELP DESK AT 406-496-4404

Name: \_\_\_\_\_ ID: \_\_\_\_\_

### NAME CHANGE

OLD INFORMATION	
NAME:	
ID:	

NEW INFORMATION	
NAME:	
ID:	

**NOTE:** In order to change your name we need proof of your name change. (i.e. Marriage License, Divorce Paperwork, Social Security Card or some other legal document)

### ADDRESS AND/OR TELEPHONE NUMBER CHANGE

OLD ADDRESS INFORMATION	
ADDRESS:	
PHONE #:	
CELL PHONE #:	

NEW ADDRESS INFORMATION	
ADDRESS:	
PHONE #:	
CELL PHONE #:	
TYPE:	Circle all that apply <span style="margin-left: 100px;">MA</span> <span style="margin-left: 50px;">BI</span> <span style="margin-left: 50px;">PR</span>

Signature: \_\_\_\_\_

If this box is checked, I am a student worker and I would also like my payroll (PY) address changed.

Enrollment Services Office Use Only:

Completed - Date: \_\_\_\_\_ Initials: \_\_\_\_\_ Forwarded - Date: \_\_\_\_\_ Initials: \_\_\_\_\_

**If payroll address (PY) is selected, please forward a copy of this form to payroll@mtech.edu**

Name Change:  Address/Phone # Updated:

Enrollment Services Office - Revised 6/22/22 G:/Reg Office Forms/Registrar's Office Forms/Change of Information Form