



Student Change of Information

Mail, deliver or fax the completed form to:
Office of the Registrar, Grande Prairie Regional College
10726-106 Avenue, Grande Prairie, AB T8V4C4
Fax: 780 539-2888 **Phone:** 780 539-2981

GPRC ID #: _____ Surname: _____ Given Names: _____

Change of Permanent Address

Effective Date: _____

Address: _____

City/Town: _____ Province/State: _____

Postal/Zip: _____ Country: _____

Home Phone: _____ Cell: _____ Business: _____

Change of Local Address *(During School Year)*

Effective Date: _____

Same as above (✓ if applicable):

Address: _____

City/Town: _____ Province/State: _____

Postal/Zip: _____ Country: _____

Home Phone: _____ Cell: _____ Business: _____

Change of Email Address

Email Address: _____

Change of Name Declaration *(Change of name will be retained as a permanent record on student file)*

I, (name as currently listed on the Academic Record) _____
Last First Middle

declare that I have officially changed my name from the above to:

_____ and request that the name on my
Last First Middle
academic record be amended to reflect this change.

I acknowledge that my former name shall remain a part of my official academic record and may be reported on official documentation.

I certify that the information provided above is true and complete in all respects and that no relevant information has been withheld. I understand that the provision of false or incomplete information may result in discipline under Grande Prairie Regional College Student Code of Conduct.

Personal information on this form is collected under the authority of the Post Secondary Learning Act and protected under Alberta's Freedom of Information and Protection of Privacy Act for authorized purposes including administration of records and production of transcripts. For any questions concerning the collection and use of this information, call the Registrar at 780-539-2981.

Signature: _____ Date: _____