



North Hennepin
Community College

Student Record Update

Records and Registration Office
7411 85th Avenue North
Brooklyn Park, MN 55445-2299
www.nhcc.edu/registration
Email: registration@nhcc.edu
Fax: 763-493-0563

This form **cannot** be used for admissions to the following programs: Paralegal & Health Careers.
Please contact this the Advising Center for information regarding admissions to these programs.

This form **cannot** be used for change of name or Social Security Number.
To do so, please contact the Records & Registration Office.

Personal Information

LAST NAME: _____ FIRST NAME _____ M.I. _____

STUDENT ID or Star ID _____ OR SSN _____

EMAIL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE (_____) _____

New Major

Indicate your desired major and degree: _____

AA AS AAS AFA Certificate

By checking this box, I acknowledge receipt of the Gainful Employment Disclosure for my major. (Certain Certificates)

Previous College(s) Attended

Name of Institution

City

State

Name of Institution	City	State

Previous Degree(s) Earned

None Associates Bachelors Graduate or Professional

I would like my Student/Tech ID number and Password emailed to me. (Your password will be reset)

Student Signature: _____

Date: _____