

SEVERN BUSINESS COLLEGE

Change of Contact Details

Please print clearly in BLOCK CAPITALS.

Full name: _____

New name (if applicable): _____

Student reference number: _____

Course of study: _____

Current address: _____

New address (if applicable): _____

Email: _____

New email (if applicable): _____

Status: _____

New Status (if applicable): _____

Phone/Mobile: _____

New Phone/Mobile (if applicable): _____

Date from which this new contact should be used: _____

Student Signature: _____

Official Use Only (updated/not-updated): _____

Official Use Only (updated by): _____