



Request for Residency Change

Proof of 90-days residency is required.

Any change of residency request submitted after a term has started will not take effect until the end of

CCC ID#

Email

Telephone

First Name

M.I.

Last Name (Full Legal Name)

Date of Birth

Current Address:

Mailing Address

City

State

Zip

Residency Requested:

- In-State
- Border State
- Out of State

Attached Proof of Residency (only one (1) is necessary):

- Utility Bill
- Lease Agreement

Signature required for request to be processed.

Student Signature

Date

Submit completed form:

In Person: First Stop (Formerly the Welcome Center), Columbia 109 | (503) 338-2411

Mail: First Stop, Clatsop Community College, 1651 Lexington Ave, Astoria, OR 97103

Email: firststop@clatsopcc.edu

Clatsop Community College is an affirmative action, equal opportunity institution. ADA accessible. For the complete Non-Discrimination and Accommodations statements, please visit <https://www.clatsopcc.edu/ada>.

Clatsop Community College es una institución de igualdad de oportunidades y de discriminación positiva. Para las declaraciones completas de No-discriminación y de Ayuda a las personas discapacitadas, por favor visite <https://www.clatsopcc.edu/ada>.