STATE COLLEGE OF FLORIDA
MANATEE-SARASOTA

ADMISSIONS
5840 26th St., W., Bldg. 1, Rm. 146, Bradenton, FL 34207 • 941-752-5050 phone • 941-727-6024 fax
8000 S. Tamiami Tr., Bldg. 100, Venice, FL 34293 • 941-408-1300, ext. 65050 phone • 941-480-3156 fax
email: admissions@scf.edu

CORRECTIONS TO THE APPLICATION FOR ADMISSION

SSN or SCF ID NUMBER

_____

Name: _____

DOB: ___/___/___

This form is to correct your current admissions application.

Please check and complete only the section(s) that apply to you.

☐ **I would like to change my start term.**

I originally submitted an application for:

☐ Fall ☐ Spring ☐ Summer of 20_____.

I would like to change my start term to:

☐ Fall ☐ Spring ☐ Summer of 20_____.

☐ **I would like to Change or Update my previously attended institutions:** Use this space to list or correct any additional colleges/universities not reported on your application.

_____

_____

_____

_____

_____

_____

_____

Applicant Signature: _____ Date_____

For Office Use Only

Date Input: _____ Initials: _____