



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: _____