



CHANGE OF PROGRAM REQUEST FORM

STUDENT ID # _____ CURRENT QUARTER _____ YEAR _____

STUDENT NAME _____ DATE OF BIRTH _____

ADDRESS _____

PHONE _____ (DAY) _____ (NIGHT) _____

Current Program _____ Degree

I Request a Change to _____ Degree

- Reason for Change:
- Career / Interest Change
 - Graduation- Date of Anticipated Graduation _____
 - Other(specify) _____
- _____
- _____

STUDENT'S SIGNATURE

DATE

Evaluated and Approved by:

ACADEMIC DEAN _____ DATE _____

Actions Taken:

INTERNATIONAL STUDENT ADVISOR _____ DATE _____

Student Instructions

If you are undecided about which degree/non-degree program to designate you should meet with a counselor prior to submitting this form. All students must meet requirement for program requested above. If you have questions regarding the above requirements, please call the Admissions Office at 714-533-3946. Please note that your degree status will not change until all of the requirements have been met.

Recorded by: _____

REGISTRAR'S SIGNATURE

DATE