Instructions: Complete the following information. Please print legibly.

1. Student ID#		
Name as it currently appears on record		
3. Information being changed? ☐ Program of Stu	udy** □ Catalog Year Only	
New Curriculum and Code		
5. Catalog Year being followed for graduation 6. Effective Semester for change		
(**Note: Students whose program of study is changed wil	I follow the catalog in effect at time of change.)	
Student Signature	Date	
For Office Use Only		
Approved by	Date	
Entered by	Date	
R-CCC 213A July '18 - previous versions obsolete		



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