

Change of Major

Name _____

CBC ID _____

Current Major _____

New Major _____

Advisor _____

Student Signature/Date

Advisor Signature/Date

**Please note, if you have not been accepted into the Dental Hygiene, Radiology or LVN Licensed Vocational Nursing Program, do not list that as your major. You must declare an Associate of Science Degree. Once accepted to the program, you must submit a major form to update your current program.

OFFICE USE ONLY

Processed By: _____	Processed Date: _____
---------------------	-----------------------