CHANGE OF CURRICULUM

Catalog Change

Both

Curriculum Change



| Student ID #: | Student Name: |
|---|---|
| Current Catalog Year: Ne | ew Catalog Year*: |
| | my degree requirements might change and that additional courses may be required re-reviewed and redistributed in compliance with the chosen catalog year |
| | tion, it may not be possible to change your catalog year at this time. |
| Current Curriculum: | New Curriculum: |
| Degree Program: | Degree Program: |
| Enter Degree Program if Other: | Enter Degree Program if Other: |
| Certificate of Completion: (12-27 credits) | Certificate of Completion: (12-27 credits) |
| Enter Certificate of Completion if Other: | Enter Certificate of Completion if Other: |
| Certificate of Proficiency: (30-36 credits) | Certificate of Proficiency: (30-36 credits) |
| Enter Certificate of Proficiency if Other: | Enter Certificate of Proficiency if Other: |
| Advisor's Signature: | • Date: |
| | |
| Student's Signature: | Date: |
| Print and Submit to the Registration and Re | cords Department or email to registrar@ocean.edu |
| Registration and Records Use Only: | |
| Entered By: | Date: |