ACADEMIC RECORDS
PROGRAM CHANGE

To change your program, complete this form and take it to the following offices for sign-off:

1. Advising Center (E235)
2. Financial Aid (B213)

Return the completed form to the Academic Records Office. Your program of study will be changed within 5 working days.

Name: _____________________________________________________________________

BHCC ID#: ________________________________          Date: ___/___/_____

Veteran:   Yes ☐                No ☐

Request Change of Program:

From: _______________________________ Certificate or Degree: ____________

To: _______________________________ Certificate or Degree: ____________

Students changing programs may be assigned to an advisor in the new program.

Signatures:

Student: ___________________________________________ Date: ___/___/_____

Advising/Counseling Center: ___________________________ Date: ___/___/_____

Financial Aid: ______________________________________ Date: ___/___/_____

Staff Use Only:

Staff initials: ___________________________ Date entered: Date: ___/___/_____