

# Request for Change of Academic Program

**Student contact information**

PLEASE PRINT CLEARLY and COMPLETE ALL ITEMS

Last name \_\_\_\_\_ First name \_\_\_\_\_ Middle name \_\_\_\_\_

Current Residence:

Address \_\_\_\_\_ Apt \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cambridge College e-mail \_\_\_\_\_

**1. Your degree program/major**
**Current**
**NEW**
**2. DESE Licensure**

MEPID no. \_\_\_\_\_

Licensure? Yes No

Level \_\_\_\_\_

Licensure? Yes No

Level \_\_\_\_\_

**3. Dates**
**Effective date**
**of change** (mm/dd/yy): \_\_\_\_\_

Fall Spring Summer Year \_\_\_\_\_

**New Program: Expected graduation date:**

January June August Year \_\_\_\_\_

Same program: please update advising institutional requirement year to current academic catalog

**4. Fill in course plan on next page with your new academic advisor**
**5. Get all signatures below** or attach printouts of emails indicating program change approval.

**The Registrar's Office cannot accept forms without all signatures.**

 Program Chair of **current** program \_\_\_\_\_ Date \_\_\_\_\_

 Academic Dean of **current** program \_\_\_\_\_ Date \_\_\_\_\_

 Program Chair of **NEW** program \_\_\_\_\_ Date \_\_\_\_\_

 Academic Dean of **NEW** program \_\_\_\_\_ Date \_\_\_\_\_

**6. By signing, I acknowledge** that:

- I must meet the requirements of my new program current at the time of this program change (see current academic catalog).
- I have reviewed this program change with my academic advisor/seminar leader and the receiving program chair and discussed the academic, program cost, financial aid, and transfer credit implications.

**Student Signature**

on paper printout or electronic\* \_\_\_\_\_

Date \_\_\_\_\_

\*Please see electronic signature options on the Registrar's web page.

**After completing form submit it to:**


**Registrar's Office**  
 Cambridge College  
 500 Rutherford Avenue  
 Boston, MA 02129

**Or email to:** registrar@cambridgecollege.edu

**Or fax to:** 617.242.0026


**New Program Course Plan** *Fill in With Your New Academic Advisor*

Course Number	Successfully completed courses that will count towards new program	Credits	Comments

Course Number	<i>See CURRENT Academic Catalog program chart</i> Courses needed for new program, yet to be completed	Credits	Comments

**Comments**