



# Office of Student Services

## CHANGE OF MAJOR FORM

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1608 S.W. 9th Street, Lawton, OK 73501 www.cnc.cc.ok.us (580)591-0203

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_

ID #: \_\_\_\_\_

Effective: Fall \_\_\_ Spring \_\_\_ Summer \_\_\_ Year: \_\_\_\_\_

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I request permission to change my major:

From: \_\_\_\_\_  
Major

To: \_\_\_\_\_  
Major

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### Approval Signatures

Academic Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

Dean of Academics: \_\_\_\_\_ Date: \_\_\_\_\_

Student: \_\_\_\_\_ Date: \_\_\_\_\_

*Please fill out this form completely and turn it in to the Student Services Offices.*