Change of Major Request Form

Date: __________________

Student Name: _______________________________________________  ID #: _______________

Dear Student:

Please understand that there are serious things to consider before changing your major including but not limited to the following:

- You may run out of time on your I-20. The International Center may not be able to extend your I-20 to allow you extra time to finish your program. You will need to consider your class choices and plan carefully. Please consider if the classes you need will be offered in the semesters you have left, and if you will realistically be able to enroll in them. You may need to take a heavy load of classes and summer session classes to finish on time. You may also be denied renewal of your visa at the Embassy if you travel, if they feel you are prolonging your studies unnecessarily or frivolously. You may end up with “extra” classes completed (> 70 units) that will not be accepted for transfer to a university. Does the university accept international students for your new major? If you need to complete classes in series (ie: math classes) are you confident you will pass them the first time? How many are still needed? Please consider this decision carefully and sign below that you understand all the risks.

- Student’s Signature: __________________  Current I-20 end date (On pg. 1 Item 5 of your I-20): __________

Requested New OCC Graduation Major: __________________  Previous OCC Major: __________________

Transfer (Future) Major:________________________________

Reason for request of new major: _______________________________________________________
_______________________________________________________________________________

Counselor:

Please create a tentative comprehensive Student Educational Plan for the new tentative major but do not lock it on Degree Works. Degree Works should not be locked until student returns the approved change of major request form to counselor.

The student’s change of major □ will or □ will not necessitate an extension of their I-20.

According to the new tentative educational plan the student should graduate by: _______________ Semester/Year.

Counselor’s Name: ____________________  Counselor’s Signature: ______________________

International Center:

□ Approved ___________________________ New I-20 end date: _____________________________

□ Does not meet eligibility ____________________________

DSO’s Signature ____________________________  Date: ____________________________

□ Copied for file