

Request to Change Degree Program

| Student's name: Please Print | | |
|---|------|--|
| Student ID #: | | |
| I am requesting to change from my current degree program of | | |
| To the new degree program of | | |
| Student signature | Date | |
| Approval: | | |
| Advisor signature | Date | |
| Dean's signature | Date | |

Please return completed form to the Registrar's office at registrar@redlands.edu