University of Houston Z Clear Lake

Academic Record Change Form

Purpose:	This form is to request a change of: Academic Plan (major) within same College, or Academic Program (change to different Academic College), or from Degree-seeking to Non-Degree Seeking status.						
Instructions:	Students must consult with an academic advisor before completing. Fill out all applicable sections and sign.						
Processing Time:							
Note:							
Student Name: _				Student ID:			
	Last Name	First	Middle	2			
Academic Level:	Graduate		Undergraduate	I currently	y have a minor (Y/N)		
Choose one of	the following:						
Change	of Academic Plan ((Major) <u>within</u> tl	ne same College:				
I am rec	juesting to change m	ny major as indica	ated below.				
	Current Plan/Subp	olan:		New Plan/S	ubplan:		
				once the student is advis Declaration Form as need	ed in the new degree plan. If a led.	oplicable,	
	Advisor ch	eck this box if th	e plan changes inv	volve a BAS or BSN deg	gree—forward to Registrar's	Office	
	of Academic Progr	am (changing to	another College):				
Effectiv	e (enter red	quirement term),	I am requesting to	change my major to anot	her College as indicated below.		
	Current Plan/Subp	olan:		New Plan/Subplan:			
	Current College: _		-	New College:			
	Advisor ch	eck this box if th	e plan changes inv	volve a BAS or BSN deg	gree-forward to Registrar's O	ffice	
Freshme	-	: The University	Academic Advisi	ng Center will forward	this form to the Registrar's C	Office for	
	er students: Once the ar's Office for proce		ed in the new maj	or, the advisor in the ne	w college must forward this fo	rm to the	
					claration Form as needed. If the	e minor is	
I am req	uesting to change 1	my academic sta	tus from <u>Degree S</u>	eeking to <u>Non-Degree S</u>	Seeking status.		
This for	m must be forwarde	ed to the Registrar	's Office for proce	ssing.			
	ent-I have been ad	· —					
Business	ences and Humanit		cience and Engine ducation	eering	University Academic Ad	vising Center	
STUDENT SI	GNATURE (RE	QUIRED)	DATE	Pl	HONE NUMBER		
ADVISOR SIG	GNATURE (REC	QUIRED)	ADVISO	OR PRINT NAME	DATE		
Acade	nic Advising Office	e Use Only		Registra	's Office Use Only		
Academic Plan	changed by:	U U		Academic Status chang	ged by:		
				Signature:			
Date:				Date: Reminder: Review BA	S/BSN Checkboxes	6/201	