

Change of Major and/or Catalog Year

CCC ID#	Em	nail T	Telephone	
First Name	M.I.	Last Name (Full Legal Name)	Date of Birth	
To request a new	v major:			
A. Enter your	current major	information in the Major section.		
	new major and rans' benefits.	d degree type. Note: Changing your major ma	y impact your financial aid	
	•	mation in the Major section. Note:Allied Heal you are accepted to the program.	th majors will be updated t	
Any change of m end of the term.	ajor request	submitted after a term has started will	not take effect until the	
Current Major:		New Major:	_ New Major:	
Current advisor				
		nay be assigned to you based on your new ma cademic advisor.	jor. Check the box if you	
		or graduation requirements: information in the Major section.		
•	•	ler which you are requesting to graduate in C	atalog Year section.	
	•	5 years, and you must have attended within the	•	
		ne year your catalog year will be changed to th		
Current Catalog Year:		New Catalog Year:		
•				

Submit completed form:

In-person: First Stop (Formerly the Welcome Center) Columbia 109 Tel: (503) 338-2411
Mail: First Stop, Clatsop Community College, 1651 Lexington Ave, Astoria, OR 97103
Email: firststop@clatsopcc.edu

Clatsop Community College is an affirmative action, equal opportunity institution. ADA accessible. For the complete Non-Discrimination and Accommodations statements, please visit https://www.clatsopcc.edu/ada.

Clatsop Community College es una institución de igualdad de oportunidades y de discriminación positiva. Para las declaraciones completas de No-discriminacion y de Ayuda a las personas discapacitadas, por favor visite https://www.clatsopcc.edu/ada.