



Program Declaration/Change of Major

LCC ID# _____

- First Time Major (If changing from non-degree or high school status)
- Change of Major

MAJOR: _____

- Associates Degree
- Certificate

TERM DECLARED: FALL SPRING SUMMER in the year 20_____

Student Name: _____

SS# _____ - _____ - _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

By my signature below, I understand if I am receiving VA benefits and/or student financial aid that it is my responsibility to notify LCC's Veteran's Officer and/or the student Financial Aid Office of my change of major.

Signature: _____ Date: _____

<p>For Office Use Only</p> <p>Processed By: _____ Date: _____</p>
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