

Academic Program Change/ Addition Request

Colleague ID	2183333		Birth Date $\frac{01}{1000}$ / $\frac{03}{10000}$	
	(required)			
Last Name	Lewis	First Name	Ven	MI M
		Effective	e Term	
By signing,	the student agrees that the listed of		come effective for the student starting in the inc	dicated term.
	-	Spring 202		
		Terr	n	
	Active	Academic I	Degree Program	
	primary academic degree progran	n code	secondary academic degree program code	
	Active	Diplomas a	and Certificates	
	C25450B			
	diploma / certificate code		diploma / certificate code	
	diploma / certificate code		diploma / certificate code	
	diploma / certificate code		diploma / certificate code	
		Ending Pr	ograms	
	Program Code		Program Code	
	Program Code		Program Code	
	Program Code		Program Code	
		Appro	vals	
	Student Signature		Date	
	Ken Turner			
	Advisor Printed Name			
	ν 1		1/5/2021	
	Advisor Signature		Date	
	Havioor Oignataro		Build	
	F	For College	Use Only	
	☐ FA/VA Student			
	☐ Processed by			
		Staf	f Initials Date	