3505 Arendell Street, Morehead City, NC 28557-2989



CHANGE IN PROGRAM OF STUDY

This form <u>cannot</u> be used to change to any **Health Science program, Basic Law Enforcement, or Special Credit**. These programs require a new Admissions Application. Acceptance into these programs is contingent upon meeting specific admission requirements; please see the Admissions office, a program advisor or a counselor for further information.

Instructions and Gainful Employment program list are located on the reverse of this form.

STUDENT INFORMATION

| Student ID Number | Last Name | Last Name | | ne | Middle |
|--|--|---|---|--|--|
| | | | | | |
| 00044440017104144 | 0014471011 | | | | |
| OGRAM ADDITION INFORMATION: Primary Program: | | Effective Semester: | | Advisor or Academic Director signature (REQUIRED | |
| | | | | 71071007 01710 | <u> </u> |
| heck only if student does not | intend to add all pr | ograms associated wi | th the prima | ary programs | NO |
| Secondary Program: | | Effective Semester: | | Advisor or Academic Director signature (REQUIRED | |
| | | | | | |
| heck only if student does not | intend to add all pr | ograms associated wi | th the prima | ary programs | NO |
| OGRAM DELETION INF | ORMATION: | | | | |
| Program Name: | | Effective Semester: | | Are you graduating from this program? | |
| | | | | | |
| | | | | | |
| | | | | | |
| <u>before submitting</u> 3. I have been given | is form, I agree to part of my prior cre inancial Aid may c <u>this form</u> to deten | edits toward the new thange and it is my re mine how this chang pyment information f | program o esponsibility e will affect | f study. y to check with t my Financial A | the Financial Aid Office |
| Student Signature: | | | | Date: | |
| | | | | | |
| OCESSING INCODMATE | ON (For Decision of a | Office Hee ONIV | | • | |
| OCESSING INFORMATION Processed by: | Office Use UNLY): | | Date: | | |
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| An Favel Opposite 5 | dunational landitudion | Compliant the Company of the | | nd to Door City | d Care National Origin on Disability |
| An Equal Opportunity Et | นนอนเบาลา การแนนเอก จ | serving the Continunity | without rega | iu iu nace, Cieec | d, Sex, National Origin or Disability Updated: 07/05/2017 |

Carteret Community College

3505 Arendell Street, Morehead City, NC 28557-2989



INSTRUCTIONS

Students requesting to change their program of study must use the following procedure:

- 1. Complete the Program Addition section completely.
- 2. Complete the Program Termination section if applicable.
- 3. Acquire the appropriate signatures as indicated below.
 - a. For applied science programs, each program advisor's signature is required.
 - b. For transfer programs (Associate in Arts, Associate in Science, Associate in Fine Arts: Visual Arts) the Dean of Arts and Sciences, the appropriate advisor in Arts and Sciences or a Counselor signature is required.
- 4. Return completed form to Main Reception desk in McGee building in person, by mail to Attn: Office of the Registrar 3505 Arendell St Morehead City NC 28557, by fax to 252-222-6265, or by email to registrar@carteret.edu.

GAINFUL EMPLOYMENT PROGRAM LIST

| Program | Code |
|---|----------|
| Aquaculture: Diploma | D15120 |
| Basic Law Enforcement | C55120 |
| *New Application required | |
| Boat Manufacturing & Service (Composite Boat) | D60330CB |
| Boat Manufacturing & Service (Marine Service) | D60330MS |
| Cosmetology | D55140 |
| Cosmetology Instructor | C55160 |
| Criminal Justice Technology (BLET Crosswalk): Diploma | D55180BL |
| Early Childhood Education: Diploma | D55220 |
| Esthetics | C55230 |
| Health Science: Therapeutic & Diagnostic Services (Nurse Aid) | D45970 |
| Hospitality Management (Diploma) | D25110 |
| Human Services Technology (Diploma) | D45380 |
| *New Application required | |
| Medical Assisting (Diploma) | D45400 |
| Therapeutic Massage (Diploma) | D45750 |
| *New Application required | |