



# ADVISOR Request for a Change of Major

Office of the Registrar  
201 W. University  
Odessa, Texas 79764  
Ph. 915.335.6404

Advisor Name: \_\_\_\_\_

Advisor e-mail: \_\_\_\_\_

Student Name: \_\_\_\_\_

SSN: \_\_\_\_\_

OC id #: \_\_\_\_\_

Address:

\_\_\_\_\_  
Number & Street or P.O. Box Apartment Number

\_\_\_\_\_  
City State Zip

Telephone:

\_\_\_\_\_  
Home Work Mobile

E-mail address: \_\_\_\_\_

Date of Request: \_\_\_\_\_

**New Major:** \_\_\_\_\_

**4-digit code:** \_\_\_\_\_

**Degree (AA, AAS, AS, or certificate):** \_\_\_\_\_

**Catalog year:** \_\_\_\_\_

*For Registrar's Office Use Only*

Processed by: \_\_\_\_\_

Date: \_\_\_\_\_

Notes/follow-up: \_\_\_\_\_

\_\_\_\_\_

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