



FLORENCE-DARLINGTON TECHNICAL COLLEGE
REQUEST A CURRICULUM CHANGE
PO BOX 100548 | FLORENCE, SC 29502-0548

This form can be filled out with Adobe Acrobat and then printed for signatures.

Students requesting a change of curriculum will be subject to all requirements and enrollment restrictions in the new curriculum.

TO BE COMPLETED BY THE STUDENT

LAST NAME

FIRST NAME

MIDDLE NAME

STUDENT ID

Local address _____

Email address _____

Current major _____ Requested primary major _____

Complete only if you are currently requesting a secondary major from one of the following choices:

Associate in General Technology

Associate in Arts

Associate in Science

I hereby request the following change(s) in curriculum. I understand I will be subject to all requirements and enrollment restrictions of the college and/or department in which my proposed new major is located, that my graduation may be delayed as a result of changing to a new curriculum.

What semester should this change take place? (year) _____
SPRING SUMMER FALL

STUDENT SIGNATURE

DATE

FINANCIAL AID SIGNATURE (REQUIRED FOR SECONDARY MAJORS ONLY)

DATE

TO BE COMPLETED BY THE ACCEPTING DEPARTMENT AND/OR COLLEGE

The change of curriculum requested above has been reviewed and approved by authorized representatives of the academic department and/or college in which the proposed new major is located. The student will be required to satisfy degree requirements found in Catalog year: _____

Comments _____

ADVISOR SIGNATURE

DATE

DIVISIONAL SECRETARY SIGNATURE

DATE

Upon completion, please send a copy of this form to the department in which the student's former major is located.
DISCLAIMER: Changing your major more than one time will delay your graduation expected date.