



REQUEST FORM FOR CHANGING DEGREE PROGRAM OR MAJOR FIELD

Student Number : **21-1-01016**

Name of Student : **MILITANTE, BRENDA MACEDA** *BRENDA MILITANTE*

FROM:

Current Degree
Program: **DOCTOR OF VETERINARY
MEDICINE**

TO:

Desired Degree
Program: **BACHELOR OF SCIENCE IN
COMPUTER SCIENCE**
Effective [] 1st Sem. ☒ 2nd Sem. [] Summer ,
A.Y. **2021- 2022**

Reason(s) for Changing:

Financial reasons, insufficient funds to continue studying veterinary medicine.

Recommending Approval:

Manolo B. Loreto, Jr.
MANOLO B. LORETO, JR.
Dean of Students
Date: Feb. 15, 2022

SANTIAGO T. PEÑA, JR.
Department Head of Current Program
Date: _____

MAGDALENE UNAJAN
Department Head of Desired Program
Date: _____

Change of Academic Adviser:

From:

MARJORIE G. AMOTO
*Printed Name & Signature of Former
Academic Adviser*
Date: _____

To:

*Printed name & Signature of New
Academic Adviser*
Date: _____

Approved:

Dr. JANNET BENCURE
College Dean of the Desired Program
Date: _____

This form should be filled up in 4 copies: 1-Registrar, 1-USSO, 1-Department, 1-Student