



REQUEST FORM FOR CHANGING DEGREE PROGRAM OR MAJOR FIELD

Student Number : 21-1-01323

Name of Student : ALTICEN, DAPHNE CLAIRE CRISOLOGO

FROM:

TO:

Current Degree Program:
BACHELOR OF SCIENCE IN
MATHEMATICS


Desired Degree Program:
BACHELOR OF SCIENCE IN COMPUTER
SCIENCE

Effective [] 1st Sem. [] 2nd Sem. [] Summer ,
A.Y. 2021 - 2022

Reason(s) for Changing:

My dream career/job is aligned on my desired degree program and I am interested on computer-related topics.

Recommending Approval:


MANOLO B. LORETO, JR.
Dean of Students
Date: Feb. 8, 2022

Dr. EUSEBIO LINA
Department Head of Current Program
Date: _____

Prof. MAGDALENE UNAJO
Department Head of Desired
Program
Date: _____

Change of Academic Adviser:

From:

To:

Printed Name & Signature of Former
Academic Adviser
Date: _____

Printed name & Signature of New
Academic Adviser
Date: _____

Approved:

Dr. JANNET C. 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