

UNITED TRIBES TECHNICAL COLLEGE

Vocation Change Form

NAME _____ DATE _____

ID # _____

1. Must be completed no later than the tenth instructional class day of the term.

2. Current
Vocation _____

Degree or Certificate (*Circle One*)

3. New
Vocation _____

Degree or Certificate (*Circle One*)

4. Financial Aid Officer/Technician must initial after funding source has been notified
by the student.

_____/_____
Initial Date

5. Turn in to the Registrar's Office

Current Advisor's Signature Date

New Advisor's Signature Date

Registrar's Signature Date

MUST HAVE ALL SIGNATURES FOR VOCATIONAL CHANGE TO BE OFFICIAL

cc: Student
 Current Advisor
 New Advisor