NOCE
NORTH ORANGE
CONTINUING EDUCATION

PROGRAM CHANGE FORM

_____ / _____ / _____ / _____

LAST NAME **FIRST** **MIDDLE** **STUDENT ID #**

Old Program of Study: _____ **Catalog Year** *(optional)*: _____

New Program of Study:

☐ (3PSCEG) General – I'm interested in classes that do not lead to a completion of a program certificate.

☐ (3PESLG) English as a Second Language – I'm interested in classes to improve my English speaking, listening, and pronunciation skills.

☐ (3P38319) Administrative Professional Program

☐ (3P24176) Advanced Office Applications Program

☐ (3P39986) Braille Transcribing Program

☐ (3P38320) Business Information Worker I Program

☐ (3P24404) Early Childhood Education Program

☐ (3P37591) Electrical Technology

☐ (3P33698) Funeral Service Assistant Program

☐ (3P24414) Fundamental Computer Concepts & Skills Program

☐ (3P39625) GED/HiSet Preparation

☐ (3P32943) Graphic, Design and Web Skills Program

☐ (3P31595) High School Diploma Program

☐ (3P24114) Management Program

☐ (3P39944) Medical Assistant Certificate Program

☐ (3P24346) Office Applications Essentials Program

☐ (3P39947) Pharmacy Technician Registration Certificate Program

☐ (3P24128) Quality Assurance Management Certificate for Medical Devices

NOTICE:

Students currently enrolled at Cypress College or Fullerton College ***should not*** select a new Program of Study as the update to your student record will affect your appointment for registration and financial aid at the college.

Student Initials

North Orange Continuing Education has made every reasonable effort to provide a current listing of approved programs of study; however the programs offered and the courses scheduled are subject to change without notice by the North Orange Continuing Education Administration. By signing your name on the signature line below, you are validating all of the information you have provided on this form to be true and accurate.

_____ _____

STUDENT'S SIGNATURE **DATE**

Form may be submitted via email to starhelp@noce.edu · Fax 714-992-9599 · Mail 315 E Wilshire Ave, Fullerton, CA 92832

OFFICE USE ONLY

Type of ID:_____ Date Rec'd:_____ Accepted By:_____ Date Updated in Banner:_____ Updated By: _____ 11/30/2020 SC