



# Program Change Request Form

Name \_\_\_\_\_ Student ID/SSN \_\_\_\_\_  
 Street \_\_\_\_\_ Apt # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Best Number to be reached: \_\_\_\_\_ Email \_\_\_\_\_  
 Desired Term to be **Effective** (select one): \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ Year \_\_\_\_\_

<b>Current Program</b> Certificate _____ Diploma _____ AAS Degree _____	<b>New Program</b> Certificate _____ Diploma _____ AAS Degree* _____
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\*If applying for an associate degree, you **may** also need to complete a HOPE Scholarship Evaluation Request Form

**Please be advised of the following:**

- Changing your program may result in additional coursework, testing requirements, and/or **changes in financial aid eligibility**.
- Students receiving Veteran's benefits may be required to complete additional paperwork for the VA through the Financial Aid Office.
- Changing your program **could** result in your **current** curriculum being **deleted or changed** to the meet current catalog requirements.

\_\_\_\_\_  
 Student's Signature Date

Office Use Only:

Yes  No High School/GED Transcript Here

Yes  No Holds on Record

Yes  No Adequate Test Scores for Regular Admit

OR

Yes  No Must Retest In:  Reading  Writing  Math  Algebra

Processed By \_\_\_\_\_ Date \_\_\_\_\_ Effective \_\_\_\_\_