SOUTHERN CRESCENT TECHNICAL COLLEGE

PROGRAM CHANGE REQUEST

Student Information

Name: _____ Student ID: _____

Phone Number _____ E-mail: _____

Term Effective: _____

Student Signature: _____ Date: _____

List **CURRENT** Program: _____

Current Award Level: (Select One)   Certificate   Diploma   Degree

List **NEW** Program: _____

New Award Level: (Select One)   Certificate   Diploma   Degree

Type of Change: (Select One)

      Change to **NEW** program

      Change to **DUAL** program (**CURRENT** + **NEW**)

Note: For Change Type **DUAL**, the **NEW** program must be the same Award Level as **CURRENT** program.

Financial Aid / V.A. Coordinator Signature

Please Be Advised:
- Students receiving financial aid require a signature from Financial Aid
- Students receiving Veteran's benefits require a signature from the V.A. Coordinator

Financial Aid Signature: _____

V.A. Coordinator Signature: _____

Admissions Use Only

STATUS: Regular   Provisional   Special Admit

Evaluated by: _____ Date: _____

Entered by: _____ Date: _____