



# Change of Degree 453.02

**Instructions:** This form is to be used by undergraduate or graduate students who wish to request a change to their degree program. Please print and return completed form with all signatures to the Registrar's office. (This form is not for current Non-Degree program students. Please go to the Admissions Office to change your program.)

**Please Print Clearly**

Full Name: \_\_\_\_\_ Student ID Number (last 5 digits): \_\_\_\_\_

Advisor: \_\_\_\_\_ Degree: \_\_\_\_\_

Effective Semester/Term: \_\_\_\_\_

**Check all that apply and provide appropriate information:**

**Change of Degree Program:**

I wish to change my current degree program from the following: \_\_\_\_\_  
to the following degree program: \_\_\_\_\_

\* NOTE: If changing to an MA Counseling or MA Theological and Biblical Studies program, you must go to the Admissions Office before submitting this form to the Registrar.

**Change of Degree Requirements:**

I wish to update the requirements of my current program to those of the most recent academic catalog, which is \_\_\_\_\_  
Current Academic Catalog Year

**Change of Major:**

I wish to change my current major(s) from the following: \_\_\_\_\_  
to the following major(s): \_\_\_\_\_

**Add a Second Major:**

I wish to add the following second major: \_\_\_\_\_

**Drop a Major:**

I wish to drop the following major(s): \_\_\_\_\_

**Required Signatures (must be signed in the following order):**

Student:	_____	_____
	Signature	Date
Program Director:	_____	_____
	Signature	Date
* Office of Admissions:	_____	_____
	Signature	Date
Registrar:	_____	_____
	Signature	Date

**OFFICE USE ONLY**

Most Recent Academic Catalog Year: \_\_\_\_\_ Entered in CAMS: \_\_\_\_\_ Date: \_\_\_\_\_ Copy sent to VACO: \_\_\_\_\_ Date: \_\_\_\_\_

Financial Aid notified of change in College Level: \_\_\_\_\_ Notify Program Director(s) of change: \_\_\_\_\_