CRISWELL COLLEGE

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. Students must meet the admissions requirements for the new degree and program. Please print and return completed form to the Registrar's Office. (This form is not for current Non-Degree seeking students. Please go to the Admissions Office to change your enrollment status.) It is recommended that students submit this form at least 30 days prior to the beginning of the requested effective semester.

Please Print Clearly

Full Name: _____ Student ID Number: _____

Current Advisor: _____ Degree: _____

Requested Effective Semester/Term: _____

Check all that apply and provide appropriate information:

Change of Undergraduate Degree:

Current Degree:

☐ Associate of Arts ☐ Bachelor of Arts ☐ Bachelor of Science

New Degree:

☐ Associate of Arts ☐ Bachelor of Arts ☐ Bachelor of Science

Change of Graduate Degree Program:

Current Degree Program:

☐ MA Christian Leadership ☐ Master of Divinity

☐ MA Christian Studies ☐ MA Theological & Biblical Studies

New Degree Program:

☐ MA Christian Leadership ☐ MA Theological & Biblical Studies

☐ MA Christian Studies ☐ Master of Divinity

Student: _____
Signature Date

Current Program Director: _____
Signature Date

New Program Director: _____
Signature Date

OFFICE USE ONLY

☐ APPROVED Effective Semester-Term/Year _____ ☐ DENIED

Director of Admissions: _____
Signature Date

Registrar: _____
Signature Date

Entered in SONIS: _____ Date: _____ Copy sent to VACO: _____ Date: _____

Financial Aid notified of change in College Level:_____ Notify Program Director(s) of change:_____ Notify Admissions _____