

CHANGE OF PROGRAM FORM



Students are permitted to request a change of program once with no charge during their academic tenure at ATC. Any additional change of program request will incur a \$15.00 charge. Change of program forms must be submitted by the published deadline date in order to be processed for the next semester. A Change of Program request form may be completed at the Registrar's Office in the Kirkland Building. The Change of Program request form must be completed and submitted with a receipt from the business office by the published deadline date in order to be processed for the next semester. *(Please refer to the Student Calendar for the last day to apply for change of major. Dates are listed for each semester.)*

Section 1: Student, please PRINT clearly in blue or black ink

Full Legal Name: _____ Titan ID#: _____
Current Program: _____ Program Code: _____
New Program: _____ Program Code: _____
Effective Term: Fall _____ Spring _____ Summer _____ Year: _____
Student's Signature: _____ Today's Date: _____

Section 2: Registrar's Office - Kirkland Bldg. Suite 159

(Review SOATEST/ SHACRSE): New program scores or courses met? Yes _____ No _____
Required Provisional Course(s) (circle): READ MATH ENGL Admit Type: _____
Other admissions requirements needed: _____
Mandatory Program Orientation Required: Yes _____ No _____
Staff's Signature _____ Today's Date: _____

Section 3: Current Program of Study-Student Navigator-Academic Advisement Center in the Nathaniel Cross Building

Student Navigator/Dean/Current Program Chair Name _____ Location: _____
Number of classes to complete Current program: _____
Navigator/Faculty Signature: _____ Today's Date: _____

Section 4: Prospective/New Program of Study (Register the student TODAY or attach ATC Schedule form of suggested classes)

New Advisor/Dean/Program Chair Name _____ Location _____
Faculty Name PRINT: _____ Signature: _____ Today's Date: _____

Section 5: Financial Aid Office Kirkland Bldg. Suite 159

1 Will the Financial Aid award be affected by making this change? Yes _____ No _____
2 If 'Yes', please indicate how FA it will be affected: _____
3 Are you a U. S. Veteran receiving VA education benefits? Yes _____ (See Financial Aid VA Rep.) No _____
4 The student has been advised regarding how this proposed Change of Program will impact his/her current Financial Aid (FA) award.
5 Financial Aid Staff Signature: _____ Today's Date: _____
6 Certifying VA Representative's Signature: _____ Today's Date: _____

Section 6: Registrar's Office - Kirkland Bldg. Suite 159

1. Student has all required signatures to process this form. Yes _____ No _____
2. Program Code (SFAREGS) and a Faculty Advisor (SGAADV) have been changed. Yes _____ No _____
3. Registrar's Office Staff Signature: _____ Date Processed: _____
Registrar's Office Staff PRINT: _____