

TRANSFER OF PROGRAM APPLICATION

COLLEGE OF ARTS AND SCIENCES

Use this form if you are an undergraduate student desiring to change your degree program from Associate to Bachelor or Bachelor to Associate. This form may **NOT** be used to transfer from non-degree status to a degree-seeking program. Student Name (print): _____ Student ID: _____ Current Degree Program*: A.A. B.A. B.S. Current Major: Desired Degree Program*: _____A.A. _____B.A. ____B.S. Desired Major: _____ Desired Emphasis/Cognate (if applicable):_____ Desired Minor: New Anticipated Graduation Date: Will you be taking primarily 8 week session courses or 15 week campus courses? (Please check one.) MILITARY STUDENTS ONLY – Do you have a SOC Student Agreement? Yes No Will you be completing an A.A. program before beginning a B.A. or B.S. program? [] Yes [] No Date A.A. program will be completed (if applicable): _____ *Changing from a bachelor's to an associate's program will impact financial aid eligibility. Please contact Regent University's Central Financial Aid Office before submitting this form. Additionally, coursework from your current degree program may not be applicable to your new degree program. Consult your Academic Advisor for more information. Student's Signature____ Fax this form to 757-352-4685 or email as an attachment to advising@regent.edu School Use Only: Current Advisor: (Print Name) (Signature) (Date) New Advisor: (Print Name) (Signature) (Date) Dean/Representative:____ (Print Name) (Signature) (Date) □ Approve Program/Major Change // Effective Catalog Year:______// Effective Start Term:______// ☐ Denied Program Change // Reason:_____ ESS Use Only: SAAADMS record created: Initials Date Initials_____ Date____ Registrar Use Only: SGASTDN/SHADEGR records updated: Initials Date Transfer Credit Re-evaluated:

Routing: If approved, forward to ESS for processing. If denied, forward to Registrar's Office for scanning.

SOC agreement revised:

Initials Date