

DEGREE PROGRAM CHANGE AGREEMENT

INSTRUCTIONS: Complete this form and return it to our office by the deadline date indicated on your Missing Information Letter (MIL).

Student's Name (printed): _____

Former Curriculum: _____

New Curriculum: _____

Read the paragraph below and sign this form if you understand and agree to the terms and conditions indicated.

It is my intention to enroll in a bachelor degree program, and I have officially done so with my Dean's Office. If for some reason I revert to an associate degree program and I am receiving federal financial aid, I will be **liable to *immediately repay*** the financial aid I received during that period of time exceeding the six semesters allowable in an associate degree program.

I fully understand and agree to all terms and conditions set forth above.

Signature of Student

Date

Social Security Number