REGENT UNIVERSITY

COLLEGE OF ARTS AND SCIENCES

TRANSFER OF PROGRAM APPLICATION

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. __A.S.__A.B.A.S __B.A. __B.Ed. __BFA __B.S. Current Major:_____

Desired Degree Program*: __A.A. __A.S.__A.B.A.S __B.A. __B.Ed. __BFA __B.S. New Major:_____

Desired Concentration (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.)

Will you be completing an A.A./A.S. program before beginning a B.A., B.Ed, BFA or B.S. program? ☐ Yes ☐ No

Date A.A. or A.S. 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_____ Date: _____

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:_____

Registrar Use Only: SGASTDN/SHADEGR records updated: Initials_____ Date_____

Transfer Credit Re-evaluated: Initials_____ Date_____

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