



# CENTRAL CAROLINA TECHNICAL COLLEGE

## CHANGE OF PROGRAM REQUEST

Name: \_\_\_\_\_ C# \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Desired Program/Concentration: \_\_\_\_\_

Are you currently receiving VA Benefits? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, you must receive counseling from the Financial Aid Office prior to changing your program.

If you are a WIA or TAA recipient, contact your casework to make sure your desired program of study will be paid.

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I have received a copy of my Gainful Employment Disclosure for my program of study from Central Carolina Technical College. Student initial: \_\_\_\_\_

### Office Use Only

**SGASTDN Current Program of Study:** \_\_\_\_\_

**ROASTAT Eligibility Status:** \_\_\_\_\_

If student is on probation, Financial Aid must approve the program change.

Program change authorized: with FA eligibility / without FA eligibility

**FA counselor's initials:** \_\_\_\_\_

**Career Counseling Required: Yes:** \_\_\_\_\_ **No** \_\_\_\_\_ **Number of Change of Program in Banner:** \_\_\_\_\_

**If yes, date career counseling was provided and career counselor's initials:** \_\_\_\_\_

**Today's Date:** \_\_\_\_\_ **Change Effective: Semester/Year** \_\_\_\_\_

**Program:** \_\_\_\_\_ **New Advisor:** \_\_\_\_\_

**Counselor:** \_\_\_\_\_

**Placement based on** \_\_\_\_\_ **RDG** \_\_\_\_\_ **ENG** \_\_\_\_\_ **MAT** \_\_\_\_\_ **CPT** \_\_\_\_\_