CT State Change or Declaration of Program Form

Students should meet with their Guided Pathway advisor prior to making a change to their academic program. Students should run a degree audit and what-if-analysis to ensure they are making informed decisions. Program changes may result in additional time to completion. The effective date of program changes depends on the date the form is processed. Please reference the academic calendar for details.

Students seeking more than one associate degree must meet the residency requirement of 25% of any degree earned at CT State and must have a minimum of 15 credits different from the first degree.

Student Information:

Last Name:_____ First Name:_____ Middle:_____

Student ID: @_____

Email:_____ Phone Number:_____

Select from ONE of the below options:

- *I am currently a degree-seeking student and wish to change my program(s) of study.*

  - Declare a Primary Program: _____ Program Code: _____
  - Declare a Second Program:_____ Program Code: _____

- *I am currently a non-degree-seeking student and wish to declare my program(s) of study. Note: you must submit all items required for matriculation status (proof of high school completion, immunization records) before this request can be processed.*

  - Declare a Primary Program: _____ Program Code:_____
  - Declare a Second Program: _____ Program Code: _____

Do you receive Veterans' Benefits?

- Yes
- No

Do you require your transcripts to be re-evaluated from a prior college (including other campuses within the CT State Community College)?

- Yes
- No

Certification: I affirm that I am the above-named person, and the information presented above is true and accurate.

Student Signature: _____ Date: _____

Please complete and return to Enrollment Services.

For Office Use Only:
Date Received: _____
Date Entered: _____
Entered By: _____