

**Instructions.** Use this form to request additions, changes, or deletions regarding your enrollment in CGU degree and certificate programs.

- You must be currently enrolled in a CGU degree program to request any program changes. If you have been withdrawn or do not have a current student status with the University, you are not eligible to use this application. Consult with your program.
- For certain transactions, a separate admissions process may be required. Verify transfer requirements with the certificate/degree program in which you are interested.
- Requests involving dual degrees may not be made using this form. See separate instructions for dual degrees.
- You are responsible for determining and finalizing all financial aid arrangements prior to submitting this form.
- If you are an international students, the concurrence of the International Students Coordinator is required.
- **All program transactions are effective at the beginning of the semester following the date of approval.**

**STUDENT INFORMATION**

**CGU ID # 254** — \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
E-Mail \_\_\_\_\_@cgu.edu Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**MY CURRENT PROGRAM/DEGREE PLAN(S)**

Program/Department \_\_\_\_\_ Degree \_\_\_\_\_  
Concentration \_\_\_\_\_

Additional Program/Plan Information (if applicable) \_\_\_\_\_

**I WOULD LIKE TO MAKE THE FOLLOWING CHANGE(S) EFFECTIVE (Semester/Year)** \_\_\_\_\_

Action <input type="checkbox"/> add	To <input type="checkbox"/> Certificate _____
<input type="checkbox"/> change	<input type="checkbox"/> Degree _____
<input type="checkbox"/> drop/leave program	<input type="checkbox"/> Concentration _____

By my signature below, I acknowledge that I understand the academic requirements and financial aid implications of the change I am requesting.

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**APPROVAL EFFECTIVE (Semester/Year)** \_\_\_\_\_

*If applicable, for acceptance of units to current program*

Department \_\_\_\_\_ Department \_\_\_\_\_

Program \_\_\_\_\_ Program \_\_\_\_\_

Approval (Print Name) \_\_\_\_\_ Approval (Print Name) \_\_\_\_\_

**Signature** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Date** \_\_\_\_\_ **Date** \_\_\_\_\_

**FOR INTERNATIONAL STUDENTS—CONCURRENCE REQUIRED**

International Student Services \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE**

DATA SERVICES

Approved Effective (Semester/Year) \_\_\_\_\_

Approved \_\_\_\_\_ Date \_\_\_\_\_