

Undergraduate Modality Change Form

Student Information

Student ID # or SSN: _____ Date: _____

Student Name: _____
Last First M.I.

Phone Number: _____ Current GPA: _____

Current Modality: Traditional Day Student College Of Professional Studies Student (Online or Evening)

New Modality: Traditional Day Student College Of Professional Studies Student (Online or Evening)

Degree Information

Major in your current modality: _____

Are you making any changes to your degree? No Yes **If yes, please specify the necessary changes below:*

- New Major: _____
- Concentration (if applicable): _____
- Minor (if applicable): _____

When you would like this modality change to take effect? Year: _____ Term: _____

Why are you changing modality? _____

Student Signature: _____ Date: _____

FOR INTERNAL USE ONLY

Office of Student Success Approval: _____ Date: _____

Business Office Approval: _____ Date: _____

Is there a balance due? _____

Financial Aid Estimated Offer: _____

Day Admissions Office Approval (if applicable): _____ Date: _____

Registrar's Office: _____ Date: _____