

Undergraduate Modality Change Form

Student Information

Student ID # or SSN: _____ Date: _____

Student Name: _____
Last *First* *M.I.*

Email: _____ Phone Number: _____

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 modalities? _____

I am aware of the differences between the Traditional and College of Professional Studies modalities. Acknowledge

Student Signature: _____ Date: _____

NOTE: Please submit this form to the Registrar's Office: registrar@indianatech.edu. It may take a minimum of seven business days for the form to be processed by all offices noted below.

FOR INTERNAL USE ONLY

Office of Student Success Approval (if changing to CPS): _____ Date: _____

Day Admissions Office Approval (if changing to Day): _____ Date: _____

Business Office Approval: _____ Balance due? _____ Date: _____

Registrar's Office: _____ Date: _____