

**JEFFERSON COMMUNITY COLLEGE
WATERTOWN, NY 13601**

MATRICULATION CHANGE REQUEST FORM

Instructions: Please complete the information below; obtain the appropriate signature and return this form to the Enrollment Services Office in the semester for which the change is to be made.

Student Name: _____ **Student ID Number:** _____
(Please Print)

Change to be effective for: ___ Fall ___ Winter ___ Spring ___ Summer Year: _____

Program currently/previously enrolled in:

Major/Program of Study: _____

Degree: ___ A.S. ___ A.A. ___ A.A.S. ___ CERT

New Program to which you seek matriculation:

Major/Program of Study: _____

Degree: ___ A.S. ___ A.A. ___ A.A.S. ___ CERT

*Math/Science, OTEC, HAT, BUS Potsdam and Childhood Education majors, please indicate concentration: _____

Please provide reason for requesting a change in matriculation:

I have discussed my desire to change my matriculation with an advisor and am aware of any impact this change could have on my expected graduation date or future academic/career plans.

My expected graduation date for this new program is: Term: _____ Year: _____

Student Signature

Date

*Authorized Signature

Date

*Must be signed by the Associate VP of the new program or by the Advising Center Director or by an authorized advisor

Please refer to the current Jefferson Community College catalog for information on approved programs of study.