

## Financial Aid Program Change Request

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ SID \_\_\_\_\_

Current Program of Study \_\_\_\_\_

New Program of Study \_\_\_\_\_

Please be specific-list degree **AND** vocational program if applicable. For example AAS in Culinary Arts.

Include a brief explanation of your request on the back.

After review, we may ask for additional documents; for example a Degree Audit or Education Plan signed by your Advisor.

The Financial Aid Office will notify you via email or mail indicating whether your request has been approved.

**CERTIFICATION:** By signing below, I agree to the following and I certify that all of the information reported on it is complete and correct. **WARNING:** If you purposely give false or misleading information on this form, you may be referred to the OIG and /or be liable to repay all aid received.

- 1) The number of program changes I can request while receiving Financial Aid is limited. I must submit this form each time to have my eligibility evaluated.
- 2) I understand that Financial Aid is limited and, if denied, I will be ineligible for Financial Aid should I continue with my new program of study. Reasons for denial may include how close I am to completing my current degree and how close I am to reaching the maximum time frame allowed to complete my degree.
- 3) I must be enrolled in classes required for my program of study. Financial Aid can only be used for classes required for my degree or certificate at Seattle Central College.
- 4) I understand that all my attempted credits at Seattle Central College within the last 10 years; applicable credits towards my degree greater than 10 years; and any transfer credits towards my degree are used to calculate the maximum time frame allowed to complete my program. This excludes up to 45 credits of developmental course work.
- 5) I must complete my program of study within a maximum time frame of 150% & 125% (for State Funds) of my program length.
- 6) I understand that I need to proceed at a pace that allows completion within the maximum time frame.

Student Name \_\_\_\_\_ Date \_\_\_\_\_

Approved/Denied by \_\_\_\_\_ Date \_\_\_\_\_