



Change of Program Request

(THIS FORM MAY BE SUBMITTED VIA FAX, MAIL OR SCANNED AND SENT ELECTRONICALLY)

(A) I, _____ hereby request to change my degree program of focus at Jones International University.

Student ID: _____ Admission Date: _____

Current degree program: _____

(B) I am requesting to pursue the following degree at Jones International University:

1. Degree Program name:

2. Reason for program change:

By signing this form I acknowledge that I understand and approve the changes being made to my student record, and authorize the change of my program of study to the program listed above (B1). I also understand that this change may impact the total cost of my program, transfer credits previously awarded, admissions requirements and my expected graduation date.

Student Signature (*required*)

Date

Please fax this form to 303.784.8154, email to studentservices@international.edu or mail it to your SSC's attention at:
Jones International University • 9697 East Mineral Avenue • Centennial, CO 80112

FOR ADMINISTRATIVE USE ONLY:

Date Processed: _____

Previous Program: _____ Final Program: _____

Transcript Review Date: _____ Signed: _____

Start Date: _____ Billing Method: _____

Comments: