

**Change of Program Form Transfer
2017-2018**

Name: _____
 Last First Initial

SSN/ Student ID: _____ Phone: _____

Circle the semester you wish your new Program will take effect.

Semester: Summer Fall Spring Year: _____ (Beginning which year?)

Check your new Program Code below:

- A.A.GEN.100 - Associate in Arts** **64 Hours**
- A.S.GEN.120 - Associate in Science** **64 Hours**
- AES.AES.140 - Associate in Engineering Science** **64 Hours**
- AFA.ART.130 – Associate in Fine Arts (Art)** **64 Hours**
- AFA.ARTED.140 – Associate in Fine Arts (Art Ed)** **64 Hours**
- BACCE.GEN.1100 – Basic Course Taker/Visiting Student** **N/A**

In addition, select a **Career Cluster** by checking one of the boxes below.

*No Career cluster needed for Bacce.gen.1100



- Undecided**
- Agriculture, Food & Natural Resources**
- Architecture & Construction**
- Arts, A/V Technology & Communications**
- Business Management & Administration**
- Education & Training**
- Finance**
- Government & Public Administration**
- Health Sciences**
- Hospitality & Tourism**
- Humanities**
- Human Services**
- Information Technology**
- Law, Public Safety, Corrections & Security**
- Manufacturing**
- Marketing**
- Physical Education**
- Science, Technology, Engineering & Mathematics**
- Social Sciences**
- Transportation, Distribution & Logistics**

You should see a **Counselor** before you change your program, especially if you want to know:

- ◆ How changing your program affects the number of credits you'll need to graduate.
- ◆ How changing your program might affect the level of English/Math courses you will need.
- ◆ How changing your program affects your eligibility for transfer to a university.
- ◆ How changing your program affects your career/job choices.

Office Use Only

Change Date: _____
Edited by: _____
Advisor _____
Assigned: _____

I understand how changing my program will impact me.

Signature _____

Date _____

Submit this completed Change of Program Form Transfer to Student Services C2100

Kishwaukee College, 21193 Malta Rd., Malta IL 60150 (Fax# 815-825-2306/email: arr@kish.edu)