PROGRAM CHANGE REQUEST

To request a program change, complete and submit this form to *Admissions & Advising by email at* Admissions@btc.edu.
Please allow 3 business days for processing.

Student may only declare one program at a time.

_____	_____	(_____)_____
Last Name	First Name	Phone Number
_____	_____	_____
Previous Last Name(s)	Email	Student ID Number

NO LONGER INTERESTED IN: _____

PROGRAM: _____Quarter Start: _____TYPE OF DEGREE: __ AAS __ AAS-T __ MRP __ DTA __ CERT

REASON FOR REQUEST: _____

I understand that other funding sources may not allow funding for two degrees; if I am in WorkFirst, BFET, etc, I will inform them. I will keep my primary degree on record in the enrollment office (LONGER program recommended). I understand that I may only receive financial aid for courses required for the program(s) selected above.

SIGNATURE: _____Date:_____

Bellingham Technical College is an equal opportunity institution.

Admissions & Student Resource Center ▪ Phone (360) 752-8345 ▪ FAX (360) 676-2798 ▪ 3028 Lindbergh Ave, Bellingham, WA 98225 ▪ www.btc.edu