

ENROLLMENT CHANGE REQUEST FORM

PURPOSE: A student requesting to change or declare their area of focus/study, concentration, track, minor, or specialization also fall under this policy and should use this form. Refer to the Academic Policies and Procedures section in the TCSP Student Handbook for details. To change degree levels (e.g. master to doctorate) or to change to a degree program with specialized accreditation or approval, contact the Office of Admissions.

INSTRUCTIONS:

1. Complete the form below, obtain approvals from both the home campus/degree program and the desired campus/degree program.
2. Submit the completed form by the Add/Drop deadline to the Student Support Counselor as indicated below. The form will not be processed without all required signatures or if submitted after the Add/Drop deadline.
3. Program and Campus Transfers must be submitted by the Add/Drop deadline and require a student to be in good Academic & FA Standing.
4. Changes and Declarations to the Area of Focus/Study, Track, Concentration, Minor, or Specialization will be processed when received.

CHICAGO 800.595.6938 (phone) 312.488.6301 (fax) Chistudentsupport@thechicagoschool.edu	ONLINE 800.595.6938 (phone) 312.254.1442 (fax) Onlinestudentsupport@thechicagoschool.edu	DALLAS/TCSP@XULA 800.595.6938 (phone) 214.575.9090 (fax) dalstudentsupport@thechicagoschool.edu	SOUTHERN CALIFORNIA 800.595.6938 (phone) 213.615.7286 (fax) Castudentsupport@thechicagoschool.edu	WASHINGTON, D.C. 800.595.6938 (phone) 202.706.5199 (fax) Dcstudentsupport@thechicagoschool.edu
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STUDENT NAME _____ STUDENT ID# _____

TCSP E-MAIL _____ PHONE# _____ DATE OF REQUEST _____

DESIRED CAMPUS _____ DEGREE LEVEL _____ DESIRED PROGRAM/CONCENTRATION/MINOR _____

HOME CAMPUS _____ DEGREE LEVEL _____ HOME PROGRAM/CONCENTRATION/MINOR _____

EXPECTED TERM/SEMESTER OF CHANGE: _____ EXPECTED DATE OF GRADUATION: _____

CHECK ALL THAT APPLY: CAMPUS TRANSFER PROGRAM TRANSFER

GRADUATE: CHANGE AREA OF FOCUS/STUDY, TRACK, OR CONCENTRATION DECLARE AREA OF FOCUS/STUDY, TRACK, OR CONCENTRATION

UNDERGRADUATE: CHANGE MINOR OR SPECIALIZATION DECLARE MINOR OR SPECIALIZATION

ARE YOU AN INTERNATIONAL STUDENT? No Yes (If yes, contact your Designated School Official (DSO)).

ARE YOU A MILITARY STUDENT? No Yes (If yes, contact the VA Certifying Official).

ARE YOU TRANSFERING TO THE WASHINGTON, D.C. CAMPUS? No Yes If yes, are you under the age of 26? No Yes

STUDENT SIGNATURE: _____ DATE: _____

APPROVED DENIED DSO SIGNATURE: _____ DATE: _____
(for International Student Only)

SAP STATUS: SAP Met Academic & FA Warning Academic & FA Probation NEW EXPECTED DATE OF GRADUATION: _____

APPROVED DENIED HOME PROGRAM/CAMPUS DEPARTMENT CHAIR/DESIGNEE SIGNATURE: _____ DATE: _____

COMMENT: _____ **Student on ADP?** No Yes

RE-VERIFICATION OF CRIMINAL BACKGROUND CHECK (IF APPLICABLE):

Reviewed: Approved Reviewed: Denied Not Applicable Updated Criminal Background Check Required (over 365 days)

APPROVED DENIED DESIRED PROGRAM/CAMPUS DEPARTMENT CHAIR/DESIGNEE SIGNATURE: _____ DATE: _____

COMMENT: _____

FOR OFFICE USE ONLY

Request <input type="checkbox"/> Approved <input type="checkbox"/> Denied Registrar Signature: _____	Transfer/Change in CVue Completed: <input type="checkbox"/> Yes <input type="checkbox"/> No Date: _____
Financial Aid: <input type="checkbox"/> Approved <input type="checkbox"/> Denied:	Notification to ISA (DSO): <input type="checkbox"/> Approved <input type="checkbox"/> Denied:
TCSP Transcript Attached:	Student Account: <input type="checkbox"/> Approved <input type="checkbox"/> Denied:
Date Student Notified: _____	