SVC | SKAGIT VALLEY COLLEGE Financial Aid

Financial Aid Office
2405 E. College Way – Lewis 121
Mount Vernon, WA 98273
Phone: MV–360.416.7666/WIC–360.679.5320
Fax: MV–360.416.7886/WIC–360.679.5375

2019-2020 REQUEST TO CHANGE PROGRAM FORM

Name _____ SS # _____

SID # _____

Please complete the information below if you have completed less than 40 credits and would like to request a change to your educational program. If you have more than 40 credits, you must submit a Petition for Extended Financial Aid Eligibility: https://www.skagit.edu/wp-content/uploads/2019/01/Petition-for-Extended-Financial-Aid-Eligibility-75-19-20.pdf

Current Program _____ **New Program** _____

New Program Beginning Quarter/Year _____ **New Program CIP Code:** _____ **# of Weeks:** _____

New Anticipated Graduation Date:

◯ **Summer** ◯ **Fall** ◯ **Winter** ◯ **Spring** **Year:** _____

By signing this form, I understand that I may only take required courses for the new program of study (if this request is approved.) Taking ineligible courses may result in Financial Aid repayment or loss of future Financial Aid eligibility.

CERTIFICATION
*I understand that submitting this form electronically as an email attachment **using my SVC email account** constitutes my signature and my certification that the information provided herein is complete and correct.*

Once completed, this form may be submitted via your mySVC email account, to financial.aid@skagit.edu. Note: this email address is for document submission only.

Student Signature _____ Date _____

SVC FINANCIAL AID OFFICE USE ONLY		
CM	❑ CM Posted in FAM ❑ Updated Data Sheet ❑ CIP Code in Trk Screen ❑ Program Updated in Reg ❑ Sent to Loan Processor (if DL awarded)	❑ Approved ❑ Denied **INITIALS & DATE:**