TROY UNIVERSITY
TROY GLOBAL CAMPUS
STATUS CHANGE FORM

CAMPUS CODE: _____ SITE:_____ STATUS: _____ Graduate
_____ Undergraduate

NAME: _____ Student ID Number:_____
(Last, First, Middle)

(Check the Appropriate item):

I. ACADEMIC RECORDS CHANGE

Name _____; Local Address _____: Work Address _____; Home Phone _____; Work Phone _____
Marital Status _____; Military Status _____; Student ID Number _____; Site _____; MOP _____

From: _____

To: _____

From: _____

To: _____

II: ACADEMIC MAJOR CHANGE: (From: _____ To: _____

Courses that will "not" be credited toward new major requirements:

1. _____ APPROVAL:

2. _____
_____
Advisor

3. _____
_____
Associate Director for Academics

ACTIONS FOR RECORDS OFFICER:

_____ Eligibility for new major
_____ Military credit applicable
_____ Admissions form (Graduate only)
_____ New Degree Plan
_____ Old Degree Plan

NOTED: _____
Registrar

III. _____ _____
Student's Signature Date

DOCUMENTATION : (As required)

Court Order: _____
_____
_____

RECORDED:

PR/PS Cards _____ Date: _____
Data Processing _____ Date: _____
Name Change File _____ Date: _____

Distribution:
White Copy - Student File
Yellow Copy - Satellite Campus
Pink Copy - Main Campus
Gold Copy - VA

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