

National University of Natural Medicine

Program Change Request

You must do the following:

- 1) Discuss with the Financial Aid the effect of the proposed change to your financial aid availability.
- 2) Obtain the curriculum layout for new program from the Registrar.
- 3) Read policy in student handbook which pertains to the requested program change.
- 4) Obtain required signatures in order on form
- 5) Submit Add/Drop forms as needed to registrar's office.
- 6) Requests must be completed by week 8 of the term prior to which the change is to be effective. 7) Financial Aid and tuition adjustments will be made according to published policies.

Student Name: _____ **Mailcode:** _____ **Phone #:** _____

Year in School: _____ **Current Program:** _____

New Anticipated Graduation Date ND: _____ **New Anticipated Graduation Date CCM:** _____

Effective Term (may not be the current term): _____

Change of Plan – please check the box of the program that you want:

____ 4 year ND ____ 5 year ND ____ 4 year MSOM ____ 5 year MSOM ____MSiMR Concurrent track - please check the two degrees above that you will be pursuing. Concurrent tracks will generally take 6 years to complete both degrees. If a custom curriculum is required due to the timing of your change you may also need to submit a petition to deviate (discuss with registrar if this will be needed).

Reason for change: _____

I am requesting the following status change. I have read and understand all of the policies stated in the current student handbook. I have met and discussed with the business office and financial aid the monetary effect of the above requested change. I have received and reviewed the program maps for the requested program. I have submitted add/drop forms for course changes if necessary.

STUDENT SIGNATURE: _____ **Date:** _____

FINANCIAL AID: _____ **Date** _____

DEAN OF ACADEMIC PROGRESS:

The request for change in status is: **Approved** **Denied**

Signature: _____ **Date:** _____

Please return this form to the Registrar's Office when completed REGISTRAR— Copies made and distributed to the following offices:

Copies ____ Financial Aid ____ Student ____ Trait ____ Program Dean