

HUNTINGDON COLLEGE

ADULT DEGREE COMPLETION PROGRAM

CHANGE OF CATALOG

All signatures must be present before returning form to Office of the Registrar/Adult Degree Completion Program. Each catalog presents the requirements for students matriculating into Huntingdon during that particular academic year and is the catalog the student's academic advisor(s) and Registrar will use in verifying degree requirements for graduation. A change of catalog will apply to all requirements: core, major, minor, concentration, as well as graduation. The catalog of choice must be a catalog dated a year in which the student is or was enrolled at Huntingdon. A student may not submit a petition for a catalog change during his or her terminal semester. If there is an enrollment break of four or more consecutive years, the student must use the catalog issued for the year in which the student is readmitted and matriculates.

I recognize that by changing catalogs I must meet the requirements (with respect to general core, unduplicated liberal arts, major, minor, concentration, and graduation requirements) contained in the respective catalogs as indicated below. My signature below confirms that I have consulted with my academic advisor(s), and I understand how this change may/will affect my future scheduling plans and, I am committed to completing all specified graduation requirements in order to do so.

I also understand that since this declaration occurred after my initial transcript evaluation, some courses previously transferred may be reversed in order to ensure my compliance with College policy (e.g. 42 hour rule, 64 hour rule, etc.), and that I will be issued a new check sheet based on the new catalog year.

Explanation/reasoning for change of catalog consideration (please feel free to use a separate sheet of paper)

Previous Catalog year: _____ (e.g. 2006-07) New Catalog year: _____ (e.g. 2007-08)

Previous major: _____ (e.g. 2006-07 Business and Organizational Resources) New Major: _____ (e.g. 2007-08 Business Management)

Full name (Print) _____ Last 4 digits of SSN _____

Student Signature _____ Date _____

Campus Location _____ HC email _____

Signature of Advisor: _____ Date _____

Registrar: _____ Date _____

Complete your portion of this form, secure the signature of your advisor, and return to the Office of the Registrar/Adult Degree Completion Program (1500 East Fairview Avenue, Montgomery, AL 36106 or by fax to 334/833-4313).