

CHANGE OF REGISTRATION

Last Name _____ First Name _____

Student ID # _____ Date _____

I am currently registered at:

- Manhattan Center Term: _____
- Adult Degree Completion Program Cohort: _____
- Rockland Campus Term: _____

I am changing my registration to:

- Manhattan Center
- Adult Degree Completion Program
- Rockland Campus

Effective Term: _____

Signatures

Student's Signature _____ Date _____

Registrar's Signature _____ Date _____

OFFICE USE ONLY:

Office of Origin: _____

Major: _____

CUMGPA _____

On Probation YES NO

Distribution:

SFS _____ STU DEV _____ REGIST _____

ESL or DEV YES NO
(NCMC to NCRC only)

ADVIS _____