

DUAL DEGREE REQUEST FOR WITHRAWAL FROM A PROGRAM

Review policy details in Student Handbook - <u>Dual Degree</u>

Graduate Students meet with your Dual Degree Program Chair to **conduct an Exit Interview** to complete this form. **International Students** should meet with ISS before Program Chair

This form allows students to withdraw from a dual degree program and complete the degree requirements for a single graduate program

THIS TOTTI GILLOWS STUGGETTES TO V	Miliaraw Horria addi acgree p	rogram and complete the degree requ	irements for a single graduate program.
I am requesting a PROGRAM I do not plan to compl		ns I am currently enrolled in as a du	ual degree student.
What is your reason for this r	equest (Please select one)?	ACADEMIC PERSONAL	FINANCIAL FAMILY
MEDICAL	MILITARY SERVICE _	PROFESSIONAL OPPORTUNITY	Y TRANSFER OTHER
Student Name:		Student I.D. Number:	
Dual Degree Program Names:		&	
Semester you started at CCA:		Number of units completed to date:	
Program Name from w	hich you are withdrawi	ng:	
 I understand that this chaprogram from which I am I further understand that understand that not all claresponsible for meeting vacompletion. I understand that if I retundegree. I further understand that irrequirements and total nuthose requirements. I understand that if I received in understand that if I received in understand that my time Chair. 	nterview, obtain signatures, and nge in status will be reflected withdrawing. am responsible for completing asses taken under the dual degivith my program advisor to under the CCA to complete a secon of I return to CCA to complete a sumber of units of that degree are sive federal financial aid, I madeline towards degree completed confer with the following off	d submit this completed form to my Pro on my transcripts and is not reversible g all degree requirements for the progra- gree program will necessarily count towa- lerstand my outstanding degree require d degree, I will be required to complet second degree, upon admittance I will be not that any coursework previously comply be subject to the Return of Title IV Fu- tion may be impacted and that I should	e unless I reapply and am accepted to the m I am intending to finish. I ards completion of this degree. I am ments and generate a plan for the all the units and requirements of that the required to complete all degree poleted will not necessarily count towards unds (R2T4) policy.
STUDENT RECORDS	studentrecords@cca.edu	If you have questions about enrollme	ent / registration.
STUDENT ACCOUNTS	studentaccounts@cca.edu	Confirm that your account is in good	
FINANCIAL AID	finaid@cca.edu	If you receive financial aid, review you	ur package.
Student Signature:			Date:
ISS Staff Name:		Signature:	Date:
*For international students with F		Signature:	Date:
Program Chair Name (1):		Signature:	Date: