

LINCOLN UNIVERSITY

CHANGE OF PROGRAM

NOTE: A fee of \$70 applies to each change of program to a lower level, or the second and further program change at the same level. The University administration will confirm the applicability of the fee* in each case.

PLEASE TYPE OR PRINT CLEARLY

1. STUDENT INFORMATION

Student ID Number: _____ Name: _____
Last First Middle

E-mail: _____@lincolnucsf.edu Phone: (_____) _____

2. CHANGE OF PROGRAM**

From: _____ To: _____

Intended Concentration: _____ Entry Semester / Year: _____ / _____

Student's Signature: _____ Date: _____

****If the fee is required, please bring this form to the Accounting Office for the payment, and then bring the receipt and this form back to the Admissions and Records Office.**

****International students requesting Change of Program are required to submit financial support documents issued no less than 6 months.**

THE UNIVERSITY USE ONLY

Admissions and Records Office:

Program Completed: _____ Date of Completion: _____ GPA: _____

\$70 fee applies: YES NO

Recommendation(s):

A. () Regular Acceptance () Conditional Acceptance () Special Acceptance () Unclassified () Denied

B. () BS () BA () MBA () MS-FM () MS-IB () DBA () CERT-UT () IAEP () Other

Comments: _____

Approved: Director of Admissions & Records / Chief Academic Officer / Admissions Officer _____ Date _____