CHANGE/SELECTION OF EDUCATIONAL GOAL AND MAJOR

Name				Semester/Year		
Stu	ıder	nt ID Number				
Sel		•	_	al and major is required for receiving financial aid. corresponding major/program of study.		
<u> </u>	se s		•	selection below. <u>Cubby</u> when you register next semester.		
1. An eligible/valid Ed goal must be chosen from the following B-F selections:				n the following B-F selections:		
	B C D E	C Transfer to a four year college without an Associate Degree D Associate Degree, General Education E Associate Degree, Vocational				
	En	Enter B-F goal selection here:				
2.	Specify your corresponding major from SRJC's programs of study. Note that B, D and E must correspond to an Associate's Degree program offered at SRJC and F must correspond to a Certificate program offered at SRJC. Program of Study Title:					
3.	Ch	Choose the length of time you will take to complete your goal (circle one).				
	A B C	One semester (or less) One year (two semesters) Three semesters	D E F	Two years (four semesters) Three years (six semesters) More than three years		
I ha	ive d	hosen and indicated the educational	goal and	major/program of study that I am pursuing at SRJC:		
	S	tudent Signature		Date (mm/dd/yy)		
Ref	turr	your completed form to:				

Santa Rosa Junior College Financial Aid Office 1501 Mendocino Avenue Santa Rosa, CA 95401

Phone: (707) 527-4471 Fax: (707) 527-4499