Non-Degree to Degree Change Form

Three Rivers Community College Admissions Office/Welcome Center (860) 215-9016 Fax (860) 215-9902

Circle Current Semester:	Fall	Spring	Winter	Summer	Year	
Name:					-	
Student ID: @			D	ate of Birth:		
	Address			City	State	Zip
If you are undecided absubmitting this form. NOTE: Your degree sta	_	ree/certificate p		ate you should meet		ior to
-		_		inscript with gradua		certificate.
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Program Requ	ested			·	Degree	Cert
Allied Health, An Science, History	nthropology, B , Math, Philoso	iology, Chemistr	y, Communicatio ence, Psychology	ral Arts & Sciences d n/Media, English, For r, Sociology, Women's	eign Language, Fo	rensic
Signature:				Dat	e:	
Office Use Only						
1) Evidence of h	igh school comple	etion	yes	no		
2) Evidence of in	nmunization confi	rmed	yes	nowaived		
3) Accuplacer Pl	acement Test (for	r new students only)	yes	no		
4) Change enter	od on Bonnor		initial	date		