Savannah Technical College  
Request for Dual Major/Change of Dual Major

Students declaring a Dual Major must do so only in the following combinations:

<table>
<thead>
<tr>
<th>If the student’s Primary Major is:</th>
<th>The student’s Secondary Major must be:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Associate Degree</td>
<td>Associate Degree</td>
</tr>
<tr>
<td>Diploma</td>
<td>Diploma or Technical Certificate of Credit</td>
</tr>
<tr>
<td>Technical Certificate of Credit</td>
<td>Technical Certificate of Credit</td>
</tr>
</tbody>
</table>

**Both Majors must be in a related field of study**  
**Student must meet Regular Admissions requirements for both programs**  
**Student must have completed 50% or more of the primary program**  
**Minimum grade point average of 2.5 cumulative average**  
**Student must enroll in at least one course from each major and verify financial aid status**

To be completed by student

Name: ___________________________  DOB: ___________________________

Student ID #: __________________  E-mail: ___________________________
(Form will not be processed without ID number)

Phone: ___________________________  Other Phone: ___________________

If you are NOT CURRENTLY enrolled as a dual major student, list your program of study below along with the program that you would like to add.

My current program is: 1) ___________________________  __Degree  __Diploma  __Certificate
Concentration: ___________________________

I would like add: ___________________________  __Degree  __Diploma  __Certificate
Concentration: ___________________________

If you are CURRENTLY enrolled as a dual major student, list both programs of study below and notate what program(s) should be changed.

My current program: 1) ___________________________  __Degree  __Diploma  __Certificate
Concentration: ___________________________

No change / remove / change to: ___________________________  __Degree  __Diploma  __Certificate
Concentration: ___________________________

My current program: 2) ___________________________  __Degree  __Diploma  __Certificate
Concentration: ___________________________

No change / remove / change to: ___________________________  __Degree  __Diploma  __Certificate
Concentration: ___________________________

I acknowledge that I am aware that a change in program level will affect my financial aid eligibility and/or type of financial award. I am aware that I must seek financial aid counseling and will be responsible for any balance that occurs as a result of a change in program and/or determination of ineligibility or reduction in award of financial aid.

Student Signature: ___________________________  Date: ___________________________
(Form will not be processed without signature and date)

For Office Use Only
The above named student ___ meets program requirements  ___ does not meet regular admissions program requirements for both programs.

RDG ________  ENG ________  MAT ________  ALG ________  GPA ________
Evaluated by: ___________________________  Date: ___________________________
Evaluated by: ___________________________  Date: ___________________________

Revised 04-28-2010