

REQUEST TO CHANGE CAMPUS

(RO - 12/19)

Registrar's Office 200 High Street, Glenville, WV 26351 304-462-4117 Fax 304-462-8619 registrar@glenville.edu

Form must be submitted by <u>October 31</u> for spring semester enrollment.

| Form must be submitted by <u>March 31</u> for summer or fall enrollment. | | | |
|--|--|---|---|
| Student Name: | | GSC ID#: | |
| GSC Email: | | | |
| Current Program: | | | |
| Requested Campus: | ☐ Glenville campus (mixed on ca ☐ Online (100% online*) | ampus classes and online classes) | |
| Effective term for ca | mpus change: □ Fall □ Spring | □ Summer of 20 | |
| Available Online | Programs: | | |
| Bachelor of Science in | Business | | |
| *Students requesti offered on campus | | ll NOT be eligible to enroll in any classes being | |
| | o "Online" will <mark>NOT</mark> be processed | must submit a Change of Major form. Requests to d unless the student has declared a program of study | y |
| Student Signature: _ | | Date: | |
| | nature: | | |

Form must be submitted to the Registrar's Office for processing. Student, advisor & department secretary will be emailed once processed.