

HONG KONG ADVENTIST COLLEGE

APPLICATION FOR CHANGE OF HKAC ACADEMIC PROGRAM FORM

Name of Student : _____ HKAC ID#: _____
First Middle Last/Surname

(Please put a tick in appropriate box(es) and return it to the Registrar's Office after you have discussed with and got a signature from your current Academic Advisor.)

STUDENT'S REQUEST:

I am a currently enrolled student, and hereby request the following change in my academic program.

Change of program

Addition of a program

Previous Program	New/Additional Program
Andrews University <input type="checkbox"/> BA <input type="checkbox"/> BS <input type="checkbox"/> BHS <input type="checkbox"/> AS Major/Emphasis (if any): _____ Higher Diploma in: <input type="checkbox"/> Enrolled Nursing (General) <input type="checkbox"/> Health & Rehabilitation Services	Andrews University <input type="checkbox"/> BA <input type="checkbox"/> BS <input type="checkbox"/> BHS <input type="checkbox"/> AS Major/Emphasis (if any) : _____ Higher Diploma in: <input type="checkbox"/> Enrolled Nursing (General) <input type="checkbox"/> Health & Rehabilitation Services

Name of Academic Advisor	Signature	Date
	<input type="checkbox"/> agreed/acknowledged <input type="checkbox"/> hesitated/reserved	

DECLARATION BY STUDENT

I (_____) understood for what I had chosen to make the above mentioned changes, and I will follow the requirements of the chosen program of HKAC in effect at the time my request is approved.
By providing my signature below, it indicates that I clearly understand the related policies mentioned in the Bulletin of HKAC.

Student's Signature

Date

COLLEGE DECISION

Approved Not recommended Pending

Comments (if any):

Registrar's Signature

Date