Credential Change of Objective Form

Application for Post-baccalaureate Credential Only Change of Objective

Complete this form if you are enrolled in a post-baccalaureate credential program and will be in a different credential program next semester. Do NOT use this form if you are currently enrolled in an undergraduate, masters, or doctorate degree program. Submit this form to the Special Education Admissions Assistant located in College Park 540.

Change of Objective for: Fall 20 _____ Spring 20 _____

1. Campus Wide ID Number _____

2. Legal Name: _____, _____ _____
   Last name First name Middle

3. County of residence: _____

4. Where did you earn your undergraduate degree? _____

5. Current Credential Program: _____

6. New Credential Program: _____

7. This application is to:
   - Drop my current credential program and change to a different credential program.
   - Complete my current credential program and begin a new credential program.

     I will complete my current program: Fall 20 _____ Spring 20 _____

I certify that all information submitted in this application is true, complete, and accurate. I understand that any misrepresentation will be cause for denial of admission.

_____ _____

Date Signature of Applicant

(Rev. 10/1/2014)