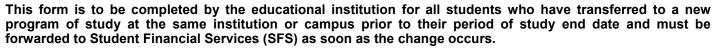
PROGRAM CHANGE NOTIFICATION



Note: For all other changes in academic status, a *Change of Academic Status* form must be completed.

	Student ID	
XXX XXX		
Social Insurance Number Student's First Name	Student's	Last Name
Name of Educational Institution		
Original Program of Study		
Name of Program of Study		Year of Total Weeks Study Attended
Start Date Last day student attended	Indicate any breaks during perio	d of study
DD MM YYYY DD MM YYYY	DD MM YYYY	to DD MM YYYY
		to DD MM YYYY
Fees charged for original program of study \$ \$ Tuition \$ Co-op Fees		
New Program of Study		
item i regram er ettaay		
Name of Program of Study		Year of Total Weeks Study Transferred from Original Program
	1 [Study Transferred from
	Indicate any breaks during peric DD MM YYYY	Study Transferred from Original Program
Name of Program of Study Transfer Date to to to	DD MM YYYY	d of study to
Name of Program of Study Transfer Date I to I I I I I I I I I I I I I I I I I I	DD MM YYYY	to DD MM YYYY
Name of Program of Study Transfer Date Image: Dot of the study Image: Dot of the study Image: Dot of the study Fees charged for new program of study \$	DD MM YYYY	to DD MM YYYY

Student Financial Services Post-Secondary Education, Training and Labour www.studentaid.gnb.ca

Brunswick

Beaverbrook Building P.O. Box 6000 Fredericton N.B. Canada E3B 5H1 Telephone: (506) 453-2577 Toll free: 1 (800) 667-5626 Fax: (506) 444-4333