



# Academic Program Application

Student name: \_\_\_\_\_ Student ID # \_\_\_\_\_

Please complete one of the following:

I am a:

First-time Freshman

High school GPA \_\_\_\_\_

Composite ACT score \_\_\_\_\_

Transfer Student

College credits completed \_\_\_\_\_

College GPA \_\_\_\_\_

Returning GU Student

College credits completed \_\_\_\_\_

Grace University GPA \_\_\_\_\_

*If you are currently in a major at Grace University, you must supply the following information and signature:*

Current Program/Major: \_\_\_\_\_

Name of current Academic advisor: \_\_\_\_\_

\_\_\_\_\_  
Signature of current academic advisor

\_\_\_\_\_  
Date

New Program/Major: \_\_\_\_\_

Name of new academic advisor or department chair: \_\_\_\_\_

\_\_\_\_\_  
Signature of new academic advisor

\_\_\_\_\_  
Date

By changing majors, I understand that I invalidate any 4 year guarantee this was previously in effect. If my new major is an eligible program, a new 4 year guarantee will begin from the date this form is received in the Registrar's office. By signing below, I certify that I have read this statement and agree with it.

\_\_\_\_\_  
Signature of student

\_\_\_\_\_  
Date

**Please note: Student is responsible for obtaining all required signatures prior to submission of form.**

***Please return the completed form to the Registrar's Office. If there are any questions, please call 402.449.2833.***

Processed By: \_\_\_\_\_ Date: \_\_\_\_\_