



REDEEMER THEOLOGICAL SEMINARY

CHANGE OF PROGRAM FORM

Change will be effective as of the start of the following fall or spring semester.

To be filled out by student:

Date: _____

STUDENT'S NAME (Please print): _____

Change from (check one):

_____ **M.Div. Student**

_____ **M.A.R. Student**

_____ **M.A. Student**

_____ **Certificate Student**

Change to (check one):

_____ **M.Div. Student**

_____ **M.A.R. Student**

_____ **M.A. Student**

_____ **Certificate Student**

Reason for change: _____

The fee for a program change is \$25.00.

Student's Signature: _____

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OFFICE USE ONLY

Date received from student: _____

[] Fee received

[] Database updated

[] Copy to student