

Transfer to Online

Circleville Campus Students transferring to an Online Degree Program

Student Informati	on			
Student Name:		Date:		
Student ID:		Phone:		
Semester:	☐ Fall ☐ Spring ☐ Summer	Academic Year:		
Email:	☐ Use my OCU email address <u>OR</u> ☐ This email	address:		
Please read the tra	ansfer limitations on the reverse and initial:			
\square I understand the transfer limitations between Circleville and Online programs				
Current Circleville	Campus Program			
Desired Online Ca	mpus Program			

Student Name:		Date:			
Student ID:		Preferred Phone:			
Enrolled in Semester: ☐ Fall ☐ Sprii	na 🗆 Summer				
Preferred Email :		<u> </u>			
Desired AGS Program:					
Associate of Arts		_			
Business	☐ Bachelor of Art ☐ Accounting	☐ Interdisciplinary Studies	☐ Bachelor of Science ☐ Data Analytics		
☐ Christian Ministry	☐ Biblical Studies ☐ Business	☐ Leadership and Ministry	☐ Information Technology		
☐ Human Services☐ Interdisciplinary Studies	☐ Criminal Justice	☐ Marketing and Consumer Behavior	<i>5.</i>		
Accesints of Colones	☐ Emergency and Disaster Management	☐ Political Science ☐ Psychology			
□ Associate of Science □ Information Technology	☐ English ☐ History	☐ Substance Abuse Counseling			
	☐ Human Services				
n 2: FinancialAid	Contact: 740-420-5944	or finaid@ohiochristian.edu			
n 2: FinancialAid Account Status:	Contact: 740-420-5944 ☐ Approve Change		□ Comments Attached		
Account Status:	☐ Approve Chang	e □ Disapprove Change	□ Comments Attached		
Account Status: Signature, Financial	☐ Approve Chang	pe □ Disapprove Change Date	□ Comments Attached		
Account Status: Signature, Financial	☐ Approve Chang	Date	□ Comments Attached □ Comments Attached		
Account Status: Signature, Financial	☐ Approve Chang Aid Representative Contact: studentdev@	Date			
Account Status: Signature, Financial	☐ Approve Chang Aid Representative Contact: studentdev@ ☐ Approve Chang	Date			
Account Status: Signature, Financial 13: Student Development Signature, Student I	☐ Approve Chang Aid Representative Contact: studentdev@ ☐ Approve Chang	Date Dohiohristian.edu Disapprove Change Date Dohiohristian.edu Dohiohristian.edu Dohiohristian.edu			
Signature, Financial n 3: StudentDevelopment Signature, Student I	Approve Change Aid Representative Contact: studentdev@ Approve Change Development	Date Dohiohristian.edu Date Date Dohiohristian.edu Date Date Date			
Signature, Financial n 3: StudentDevelopment	Aid Representative Contact: studentdev@ Approve Change Approve Change Contact: agsadvising@ Approve Change	Date Dohiohristian.edu Date Date Dohiohristian.edu Date Date Date	□ Comments Attached		

Please Read Before Continuing

*Student is responsible for reaching out to the departments below and obtaining the appropriate signatures. *

Important Information

Transferring to from the Circleville Campus to an Online Program

- This form must be approved by each of the indicated offices before you will be enrolled in the new program.
- The program transfer fee is \$100.
- Leaving the Residential Program and enrolling as an AGS student means you are withdrawing from your current program. Should you decide to return to the Residential program, your current program requirements may be substantially different, or it may not be an available option.
- Student transferring to AGS forfeit all scholarships except the CCCU membership and pastoral scholarships.
- Some credits from Residential Program courses may not apply toward your AGS degree program. We encourage you to find out how transferring affects your ability to graduate on time before making this change.