



San Diego Community College District Change of Degree Declaration

City Mesa Miramar ECC

Name: _____
(PRINT) Last First MI

Student ID Number: _____ Birthdate: _____

Corrected degree status: No Degree AA/AS Degree BA/BS Degree

Colleges Attended	Dates of Attendance		Colleges Attended	Dates of Attendance	
	From	To		From	To

Provide a detailed explanation of your request for a change of degree status. Attach supporting documentation if available.

Title IV Regulations prohibit an institution from awarding a PELL Grant to students with a baccalaureate degree or higher.

I CERTIFY UNDER PENALTY OF PERJURY THAT I AM ENROLLED IN AN UNDERGRADUATE COURSE* OF STUDY AND HAVE NOT EARNED A BACCALAUREATE DEGREE, THE EQUIVALENT, OR A FIRST-PROFESSIONAL DEGREE FROM ANY INSTITUTION WITHIN, OR OUTSIDE OF THE CONTINENTAL U.S.

WITNESS my hand and official seal

Signature: _____ Date: _____

*An undergraduate course of study under this definition is one that usually does not exceed four (4) academic years or is a program of four (4) to five (5) academic years designed to lead to a baccalaureate or first-professional degree. If the program is longer than five (5) years (for example, a 6-year pharmacy program), then students enrolled in that program are considered undergraduate students only for the first four (4) academic years of the program.

<u>OFFICE USE ONLY</u>	
Comments: _____	

Accepted by _____	Date _____