Multiple Program Approval Form

Guilford Technical Community College, P. O. Box 309, Jamestown, NC 27282, 336-334-4822

Important Information: Please Read Prior to Completing Form

Students can normally only declare one program-of-study at a time to ensure that they have a clear pathway of study to follow and to decrease the number of classes taken that do not align with their primary educational goal.

However, students may add stackable diplomas and certificates that fall under a parent associate degree or diploma and may do so without further approval provided that all of the coursework in the diploma and/or certificate is contained in the associate degree or diploma that the student is pursuing. *Therefore, do not use this form to add stackable diplomas and certificates that fall completely under an active associate degree or diploma.*

Students who wish to pursue multiple programs of study in different disciplines at the same time must use this form to seek approval from their faculty advisor, dean, and senior vice president of Instruction. The student's faculty advisor will work with the student to develop a plan of study to complete both degrees.

Student Information

Last Name: _____   First Name: _____   Student ID: _____

Email: _____   Phone: _____

Primary Program Code: _____   Primary Program Title: _____

Requested Program Code: _____   Requested Program Title: _____

Student Signature: _____   Date: _____

Educational and/or Vocational Reason for Requesting Multiple Programs of Study

Please use the lines below and/or attach additional documentation to explain how adding a second program supports your educational and/or vocational goals.

_____
_____
_____
_____
_____
_____
_____
_____
_____

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Plan to Complete Multiple Programs

Please use the lines below and/or attach documentation to map out your plan to complete your current primary program as well as the requested additional program.

Term	Course	Course Description	Applies to Program(s)
Ex: Fall 2023	Ex: ENG-111	Ex: Writing and Inquiry	Ex: Associate in Arts

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Faculty Advisor for Primary Program of Study

Approved: ___ Yes ___ No

Describe rationale for approval or denial:

Printed Name: _____ Signature: _____ Date: _____

Faculty Advisor for Requested Program of Study

Approved: ___ Yes ___ No

Describe rationale for approval or denial:

Printed Name: _____ Signature: _____ Date: _____

Dean of Primary Program of Study

Approved: ___ Yes ___ No

Describe rationale for approval or denial:

Printed Name: _____ Signature: _____ Date: _____

Senior Vice President of Instruction or Designee

Approved: ___ Yes ___ No

Describe rationale for approval or denial:

Printed Name: _____ Signature: _____ Date: _____

Form Version 2.1 (03/03/2023)