



Change of Term Request Form

Print clearly or type.

Student Information

Name: _____

Student ID # or last 4 digits of Social Security #: _____ Date of Birth: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Day Phone: _____ Evening Phone: _____

How long have you lived in the state of Georgia: More than 12 months Less than 12 months

Campus: Blairsville Clarkesville Currahee

Term Request

I request that the term and/or year indicated on my application for admission to North Georgia Technical College be changed to the following:

Program of Study: _____

Program Level: Certificate Diploma Associate Degree

NEW Entrance Term: Fall Spring Summer

Entrance Year: _____

Student Signature: _____ Date: _____

As set forth in its student catalog, North Georgia Technical College complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, creed or religion, national or ethnic origin, sex (including pregnancy, sexual orientation, and gender identity), disability, age, political affiliation or belief, genetic information, veteran or military status, marital status, or citizenship status (except in those special circumstances permitted or mandated by law). The following persons have been designated to manage inquiries regarding the non-discrimination policies: Dr. Vinson Burdette, VP of Student Affairs, Title IX Coordinator, Clegg Center 211, (706) 754-7711, vinson.burdette@northgatech.edu and Kay Carroll, Special Populations and Retention Coordinator (Section 504), Clegg Center 214, (706) 754-7828, kay.carroll@northgatech.edu at 1500 HWY 197 N, Clarkesville, GA 30523.

This institution is an equal opportunity provider and employer. If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

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