



SAGINAW CHIPPEWA TRIBAL COLLEGE Declaration of Degree

Student's Name: _____ Social Security No: _____

Check one:

New Student Continuing Student

Check one:

Associate of Arts: Native American Studies Catalog year _____

Associate of Arts: Liberal Arts Catalog year _____

Associate of Arts: Business Catalog year _____

Associate of Science: General Science Catalog year _____

Michigan Transfer Agreement Catalog year _____

Office Use:

Student's Signature: _____ Date: _____

Signature of Registrar/Dean: _____ Date: _____

.....
 Check here if this is a degree change

Previous degree: _____ Previous Catalog _____

Note: when changing degrees, the current catalog must be used for the new degree.