RETURN TO FINANCIAL AID OFFICE:

DUAL MAJOR DECLARATION FORM

COSUMNES
RIVER COLLEGE

STUDENT INFORMATION

_____   _____

Last Name   **First Name**   **M.I.**   **Student ID#**

Declaring Semester:

☐ Summer_____{Year}   ☐ Fall_____{Year}   ☐ Spring_____{Year}

Major: _____

Degree Type: _____

Code: _____

Major: _____

Degree Type: _____

Code: _____

CERTIFICATION AND SIGNATURE

By signing this form, I understand if I received financial aid at another college for the semester(s) I selected above, I must repay all financial aid funds back to the college before this form can be processed.

Student Signature: _____   Date: _____