



Registrar@sunybroome.edu
P.O. Box 1017 • Binghamton, New York 13902
Voice: (607) 778-5027 Fax: (607) 778-5294

## **Dual or Second Degree Form**

Student: Begin the process with your Academic Advisor.	
Student Name	
SUNY Broome ID#	
Effective Semester	
<ul> <li>Dual Program can be added under the following criteria:</li> <li>All previous courses and grades will remain on the permanent record</li> <li>There must be a minimum of 15 credit hour difference between both programs</li> <li>The student will be bound by the graduation requirement of the catalog current at the time of adding the second program</li> </ul>	
Note: Student interested in adding a program in a competitive adm the competitive admissions process and be formally accepted into	
Current Program of Study	
Division	
Program/major/certificate (if online please specify)	
Dual or Second Program of Study	
Division	
Program/major/certificate (if online please specify)	
I understand the following: that my second program may lengthen enrolling in a second program may have academic implications suc cumulative grade point average; that enrolling in my second prograwill follow-up with the financial aid office, SS 111, or Veterans Milit	h as raising or lowering my am may have financial aid impacts; I
Student Signature	Date
Academic Advisor Signature	Date