VA Program Change Questionnaire

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Number\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_

Student Number\_\_\_\_\_\_\_\_\_ Advisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Credits\_\_\_\_\_\_\_\_ Age\_\_\_\_\_

1. Why are you a good candidate for the VA Program?
2. What is your plan for graduation? Include your desired graduation date and number of credits.
3. What is your post-secondary goal?