



Request to Change Catalog Year

Registrar's Office
PO Box 1238
Twin Falls, ID 83303-1238
Phone: 208-732-6795
Email: records@csi.edu

Date: _____

CSI ID#: _____

Student Name: _____

- *CSI evaluates students' degree and/or certificate completion based on the graduation requirements stipulated in the catalog at the time the student matriculates.*
- *Students who have enrolled in credit classes at CSI for at least one term per academic year will be considered "continuously enrolled" and may remain in the catalog they matriculated in. Continuously enrolled students also have the option of meeting the graduation requirements stated in the catalog in effect under a more current year.*
- *If while enrolled at CSI, a student changes or declares a new major, they may continue in the catalog they matriculated in, unless the new major was not offered that academic year.*

Requested Catalog Year: _____

Student Signature: _____

Registrar's Office Use Only

Processed by: _____

Date: _____