



MADISON COLLEGE

Primary Program Form

INSTRUCTIONS - This form is to be submitted by a student who is active in more than one program. The student may complete and submit this form to specify their primary program and to allow discontinuation from program(s) in which he/she is no longer interested, if applicable.

STUDENT INFORMATION

Last Name _____ First Name _____ Middle Initial _____
Student ID _____ Phone _____ Apartment _____
Mailing Address: Street _____
City _____ State _____ Zip Code _____

PROGRAM DECLARATION

I would like the following program to be my Primary Program:

Primary Program: _____

I wish to be removed from the following program(s), if applicable.

1. _____ 2. _____

I anticipate receiving financial aid. ☐ Yes ☐ No

STUDENT SIGNATURE & AGREEMENT

By signing, I acknowledge that I am electing to declare the program listed above as my primary program. If I will be receiving financial aid, I understand my primary program indicated above is my only active program eligible for financial aid.

Student Signature _____ Date _____

SUBMISSION INSTRUCTIONS

Submit your completed form in **one** of the following ways:

Email (preferred): must send from your Madison College student email account to EnrollmentServices@madisoncollege.edu

In-person: Enrollment Services, Truax Campus, Rm. A1000 or any regional or metro campus

Mail: Enrollment Services, Madison College, 1701 Wright St. Madison, WI 53704

Questions? For assistance with this form, call Enrollment Services at (608) 246-6210 or visit in-person. You may also seek assistance from an advisor or counselor in Student Development and Retention Services, (608) 246-6076.

Truax, Regional & Metro Campus Staff - Date stamp, initial, scan and email to intake@madisoncollege.edu.

Staff Initials _____ Date Received _____