

CHANGE OF DEGREE PROGRAM REQUEST

Student's First & Last Name:		
Student ID:	Date Enrolled in Current Program:	
It is not uncommon for students to decide to change Office, their advisor, and a new deg	their area of study. When doing so, the gree program with their completed cou	· · · · · · · · · · · · · · · · · · ·
CURRENT DEGREE PROGRAM:		
Current Degree Program	Current Advisor	Current Advisor Signature
REQUESTED DEGREE PROGRAM:		
New Degree Program	New Advisor	New Advisor Signature
The new degree plan is filed with the Registrar.		
Changes in plans may be appro	oved only by the Vice President of	Academic Affairs.
Student Signature:	Date:	
Registrar Signature:	Date Program Changed:	
Vice President of Academic Affairs:		Date: