

Submit this completed form to the School of Professional Development before the first day of classes of the first semester indicated for the New Degree Program/Level. Forms received after this date will be denied.

Please Note: Changing your Graduate Program or Academic Level from a PhD to a master's-level program will result in the original program being discontinued without a degree being posted. If this is not your intention please consult with your School of Professional Development. International Students must have permission from an International Student Advisor for this form to be approved.

Academic Information		
<u>Last</u> Name (Current Name on SB Records)	<u>First</u> Name	SOLAR I.D. No. (not Social Security #)
Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	If you answered NO to both questions, indicate your immigration status:	
Are you a Permanent Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Old Degree Program/Level		
Designator & Degree Program (PHY MS, etc.)	Select Program Modality <input type="checkbox"/> Online <input type="checkbox"/> Hybrid <input type="checkbox"/> Off-Campus <input type="checkbox"/> Cohort	Final Semester and Year of Degree Program <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer 20_____
New Degree Program/Level		
Designator & Degree Program (SPD MA, etc.)	Select Program Modality <input type="checkbox"/> Online <input type="checkbox"/> Hybrid <input type="checkbox"/> Off-Campus <input type="checkbox"/> Cohort	First Semester and Year of Degree Program <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer 20_____

I hereby certify that the information I have submitted is complete and accurate to the best of my knowledge, and that I understand the terms of this request.

Signature of Student _____ **Date:** _____

The following section must be completed for this form to be approved and processed:

Old Degree Program Advisor _____ **Date:** _____

Old Degree Program Director _____ **Date:** _____

New Degree Program Advisor _____ **Date:** _____

New Degree Program Director _____ **Date:** _____

If the new program is in the Graduate School, please submit this form to 2401 Computer Science Building for approval.

If the new program is in SPD please submit this form to N-113 Social & Behavioral Sciences Building for approval.

International Student Advisor Approval (if required):

Date Received

International Student Advisor

Date: _____

Disapproved

Approved & Processed

Revised 12/2025

Date: _____

School of Professional Development