## CHANGE OF DEGREE INFORMATION – GRADUATE STUDENTS ONLY

## PLEASE COMPLETE ONLY THE SECTION(S) REQUIRING CHANGES

Note: With few exceptions, state law gives you the right to request, review, and correct information about yourself collected on this form.

## **GRADUATE MINOR/CONCENTRATION/CATALOG TERM**

| Student Name (print current name onfile):  |  |
|--|--|
| Student ID Number (print current SID on file):   |  |
| Change my previous graduate academic program/catalog term:   |  |
| Current Program and Major (no changes will be made to this):   |  |
| ADD certificate program to current graduate program:   |  |
| New Catalog Term:  |  |
| New Campus (for Education programs only):  |  |
| New Concentration or Minor:  |  |
| Change program to Thesis or Non-Thesis   |  |
| NOTICE: Major changes are not allowed for graduate students. Graccepted to a different graduate program. Inappropriate changes will n            |  |
| AUTHORIZATION  |  |
| Form must be signed by the student. For Alpine programs, the advisors(s) must dean must sign; for MRGC programs, the Department Chair must sign. | sign, if there is a change in thesis/non-thesis th |
| Student Signature  | Date:  |
| Alpine Programs: Advisor Signature   | Data   |
| Advisor Signature  | Date:  |
| Dean Signature   | Date:  |
| MRGC Programs: Department Chair Signature  | Date:  |