

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 Masters level program will result in the original program being discontinued without a degree being posted. If this is not your intention, please consult with the School of Professional Development. International Students must have permission from an International Student Advisor for this form to be approved.

Academic Information		
Last Name (Current Name on SB Records)	First 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/Certificate Program (MA, HEA, etc)	Select one Cohort (select one) <input type="checkbox"/> Online <input type="checkbox"/> Traditional	Final Semester and Year of Program (select one) <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer 20__
New Degree Program/Level		
Designator & Degree/Certificate Program (MA, HEA, etc)	Select one Cohort (select one) <input type="checkbox"/> Online <input type="checkbox"/> Traditional	First Semester and Year of Program (select one) <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:** _____

or

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

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

or

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

Please submit this form to 2321 Computer Science for approval.

<p>International Student Advisor Approval (if required):</p> <p>_____ Date: _____</p> <p><i>International Student Advisor</i></p> <p><input type="checkbox"/> SPD Disapproved</p> <p><input type="checkbox"/> SPD Approved & Processed</p> <p>_____ Date: _____</p> <p><i>School of Professional Development</i></p>	<p>Date Received by SPD</p>
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