The Graduate School / School of Professional Development
Stony Brook University
Stony Brook, NY 11794-4433

**Change of Graduate Program
and/or Academic Level**

Please Type or Print carefully

: **Submit this completed form to the Graduate School <u>before the first day of classes</u> of the first semester indicated for the New Degree Program/Level. Forms received after this date will be denied. Offer letters must be included with this form for all International and/or funded students.**

Changing your Graduate Program or Academic Level will result in the original program being discontinued without a degree being posted. If this is not your intention please consult with your Program Director, the Graduate School or the 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**	**Student I.D. No.** (*not Social Security #*)

Are you a U.S. citizen? ☐ Yes ☐ No Are you a Permanent Resident? ☐ Yes ☐ No	If you answered NO to both questions, indicate your immigration status:

Old Degree Program/Level

Designator & Degree Program (PHY MS, etc.)	**Academic Level** (circle one) G0 G1 G2 G3 G4 G5	**Final Semester and Year of Degree Program** (circle one) Fall Spring Summer 20____

New Degree Program/Level

Designator & Degree Program (SPD MA, etc.)	**Academic Level** (circle one) G0 G1 G2 G3 G4 G5	**First Semester and Year of Degree Program** (circle one) Fall Spring 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-201 Social & Behavioral Sciences Building for approval.

International Student Advisor Approval (*if required*)**:**

_____   **Date:** _____
International Student Advisor

☐   **Disapproved**
☐   **Approved & Processed**

_____   **Date:** _____
The Graduate School / School of Professional Development

Date Received

Revised 6/06