 **The Graduate School**

 **The School of Professional Development**

**gradrecords@stonybrook.edu**

**spd@stonybrook.edu**

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

*Submit this completed form to the Graduate School or School of Professional Development* ***before the first day of classes*** *of the first semester indicated for your new degree program/level. Forms received after the start of the term will be denied. Offer letters must be included for ALL GRADUATE SCHOOL PROGRAMS.*

*For Change of Levels: Changing from a PhD to a Masters level program will result in your original program being discontinued without a degree being posted. If this is not your intention, please consult with your program director and or the appropriate school.*

*International students must have permission from Visa & Immigration Services for this form to be approved.*

*ALL doctoral programs require a minimum TOEFL score of 90 for admission and a satisfactory speak sub-section score.*

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| **Last** Name (Current Name on SB Records) | **First** Name  | **Student I.D. No.** (*not Social Security #*) |
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| Are you a U.S. citizen? 🞎 Yes 🞎 No | If you answered NO to both questions, indicate your immigration status: |
| Are you a Permanent Resident? 🞎 Yes 🞎 No |  |
|  |  |  |
| Old Degree Program/Level |
| **Designator & Degree Program** (PHY MS, etc.) | **Academic Level** (circle one) | Final Semester and Year of Degree Program |
|  | G0 G1 G2 G3 G4 G5 | (circle one) Fall Winter Spring Summer 20\_\_\_\_ |
| New Degree Program/Level |
| **Designator & Degree Program** (SPD MA, etc.) | **Academic Level** (circle one) | First Semester and Year of Degree Program |
|  | G0 G1 G2 G3 G4 G5 | (circle one) Fall Winter 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:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Visa & Immigration Services Signature (if required): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **For Graduate School & School of Professional Development Use Only:*** **Denied & Reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_**
* **Approved & Processed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 Signature  |