



# APPLICATION FOR GRADUATE CHANGE OF PROGRAM, DEGREE, EMPHASIS, OR ADVISOR

(To be used by currently enrolled MU students)

### DEGREE-SEEKING APPLICANTS

Submit this application to the Director of Graduate Studies of the program to which you are applying, along with any other required application materials.

### POST-BACCALAUREATE APPLICANTS

Applicants for Post-Baccalaureate graduate study should submit this form and outside transcripts directly to Graduate Studies, 210 Jesse Hall.

1. Name: \_\_\_\_\_ Student number: \_\_\_\_\_  
(Last) (First) (Middle) (Former name)

2. Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City, State, Zip) E-mail: \_\_\_\_\_

3. Are you an International Student?  No  Yes: Current Visa Type: \_\_\_\_\_ Type of Visa requested: \_\_\_\_\_

4. Semester of requested change? (Check one)  Fall  Spring  Summer Year \_\_\_\_\_

5. Admissions category desired:  Degree-Seeking  Grad Certificate  Post-Bach (non-degree- do not complete questions 8 or 9)

6. Are you currently enrolled as an undergraduate or a graduate student?  Undergraduate  Graduate

7. Will you be enrolling in primarily online courses/distance courses?  Yes  No

**Student Signature** \_\_\_\_\_ Date: \_\_\_\_\_

## 8. PROGRAM CHANGE

(Please be as specific as possible)

Current Program/Dept.

New Program/Dept.

Academic Program		
Emphasis		
Degree	Grad Cert _____ Master of _____ Doctor of _____ EdSp <input type="checkbox"/> Post-bach <input type="checkbox"/>	Grad Cert _____ Master of _____ Doctor of _____ EdSp <input type="checkbox"/>

**To be completed by Academic Program ONLY:**  
  
Decision for change of division, program, degree, or emphasis

- Accept requested changes (complete all questions)  Deny requested changes (skip to signature)
- Check ONLY ONE: This change is to:  Replace current degree program  Be added to current degree program
  - Reason for requested change (graduation, leaving program, etc.): \_\_\_\_\_
  - Departmental funding awarded to student:  YES (attach award letter if international)  NO
  - Advisor: First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Signature of New Program's Director of Graduate Studies: \_\_\_\_\_  
Date: \_\_\_\_\_

## 9. ADVISOR CHANGE

Current Advisor

Requested New Advisor

First Name	Last Name	First Name	Last Name
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**To be completed by Academic Program ONLY:**  
Complete if only changing advisor

- Accept requested change  Deny requested change
- Reason for requested change (change of emphasis, etc.): \_\_\_\_\_

Signature of Current Program's Director of Graduate Studies: \_\_\_\_\_  
Date: \_\_\_\_\_



## INSTRUCTIONS: CHANGE OF DIVISION, DEGREE, PROGRAM, EMPHASIS, OR ADVISOR FORM

For assistance with this form, please call the Graduate Studies at 882-6311.

This form is to be used for any currently enrolled MU student, including

- Graduate students seeking a change in their program, degree, emphasis, and/or advisor.
- Current graduate students changing to or from Post-Baccalaureate status.

The shaded gray parts of this form are to be completed by the department/area program after the student has completed the white sections. Upon completion by the academic program, the original is sent to Graduate Admissions, 210 Jesse Hall.

**If student is requesting a change of Division, Program, or Emphasis** complete the gray box attached to question #8 and obtain the appropriate DGS's signature.

- Make sure the program, emphasis, and degree (in question #8) are all indicated for both the student's old and new programs to ensure student records are accurate. This information is needed even if the requested changes are denied.
- If the requested changes are accepted, complete all of the questions in the gray box to ensure prompt processing.
- If this change also results in an advisor change, indicate the new advisor in this same gray box (DO NOT complete the gray box attached to #9). Include the advisor's first and last names.
- If the student is an international student, attach a copy of the departmental funding letter if departmental funding is awarded.

**If student is ONLY requesting a change of Advisor**, complete the gray box attached to question #9 and obtain the DGS's signature. Make sure the advisor's first and last names are indicated.

Current degree-seeking student changing to post-baccalaureate status should submit this form directly to the Graduate Studies office.

### Graduate Studies

University of Missouri-Columbia  
 210 Jesse Hall  
 Columbia, MO 65211-1160  
 573-882-6311  
 Fax: 573-884-5454  
<http://gradschool.missouri.edu>