**REQUEST FOR CHANGE OF DEGREE PROGRAM**

Students should file a Program of Studies (those transferring to the Ph.D. program) or Memorandum of Courses (those transferring to M.S. program) as soon as their degree switch has been approved.

1. **PERSONAL INFORMATION**

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| Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | NUID:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(number and street) (apt.) (city/state/zip)*  |

I wish to transfer from the M.S. to the Ph.D. program [ ]  Fill out Section 2 below.

I wish to transfer from the Ph.D. to the M.S. program [ ]  Fill out Section 3 below.

 Student signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

1. **TRANSFER FROM M.S. to Ph.D.**

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| Current M.S. advisor : |

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| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*Advisor name* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*Advisor signature* |

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| Current M.S. committee members: |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Member name* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Member signature* |

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Member name* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Member signature* |

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Member name* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Member signature* |

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| Proposed Ph.D. advisor : |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Advisor name* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Advisor signature* |

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Co-advisor name (if any)* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Co-advisor signature* |

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| Current Specialization  | [ ] EEB  | [ ] GCMB  | [ ] Plant Pathology  |
| Proposed Specialization  | [ ] EEB  | [ ] GCMB  | [ ] Plant Pathology  |
| I will defend a M.S. thesis and obtain a M.S. degree  | [ ] Yes | [ ] No | Expected Defense Date\_\_\_\_\_\_\_\_\_\_\_\_ |

* Please attach your most recent Annual Report and a copy of your transcript (unofficial transcript downloaded from MyRED is acceptable).
* Ask your proposed advisor to write a letter in support of your application to the Ph.D. Program. This letter should be submitted to the Graduate Secretary.

In a paragraph describe your research interests, and why your interests are better served in the Ph.D. program.

1. **TRANSFER FROM Ph.D. to M.S.**

 State reason you wish to transfer to the M.S. program.

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| Current Ph.D. advisor:  |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Advisor name* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Advisor signature |

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Co-advisor name (if any)* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Co-advisor signature* |

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| Proposed M.S. Advisor: |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Advisor name* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Advisor signature* |

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| Current Ph.D. Committee Members:  |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Member name* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Member signature* |

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Member name* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Member signature* |

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Member name* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Member signature* |

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*Outside Rep name* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Outside Rep signature* |

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Expected M.S. defense date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **GRADUATE COMMITTEE DECISION**

 Denied ( ) Approved ( ) Effective Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Graduate Committee Chair \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_