

PROGRAM (SCHOOL/COLLEGE) CHANGE FORM

Return to: Office of the Registrar, Unit 4077
Wilbur Cross Building, 233 Glenbrook Road
Storrs, Connecticut 06269-4077

To The Student: 1. Complete parts I and II. 2. Print an unofficial copy of your transcript from the Student Administration system. 3. Take the petition and the transcript to the associate or assistant dean of your new school or college.

Part I: Student Biographic Data

Student Name: _____ Student ID: _____

Current Address: _____

Email Address: _____

Current Campus: _____ Current Phone: _____

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Part II: Program Change Requested

From: _____
(School/College)

To: _____
(School/College)

New Major: _____ Degree Sought (BA/BS): _____

Student Signature: _____ Date: _____

Note: Students changing out of the General Studies program must contact the Dean of Students Office at (860) 486-3426 to declare residency in order to receive an accurate fee bill

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PART III: (For Dean's Office Use Only) Dean's Permission

Effective Year Term: _____ Fall ____ Intersession ____ Spring ____ May Term ____ Summer Session I, II, IV

New Advisor's Name (Please Print): _____

New Advisor's ID#: _____

Dean's Signature: _____ Date: _____