

PLAN AND DEGREE LEVEL CHANGE FORM

PDF FILLABLE FORM - Please complete electronically before submitting to your department.



WASHINGTON STATE
UNIVERSITY

NAME: _____ WSU ID: _____

EMAIL: _____ PHONE NUMBER: _____

PLAN AND DEGREE LEVEL CHANGE INSTRUCTIONS:

Use this form to close a degree program or to move out of your current program and into a new program. If you wish to add a new program (in addition to your current program or set to begin after completing your current program) do not continue – you must use the *Add an Academic Program and Degree Level* form.

If you are closing a degree program, please work with the academic coordinator in that program. If you are moving into a new program, you will also need to work with the academic coordinator for your new program. Submit this completed form to your academic coordinator for department/program review and submission to the Graduate School via myWSU.

INTERNATIONAL STUDENTS ONLY:

VISA STATUS: F1: _____ J1: _____ FUNDING SOURCE: Externally Funded: _____ Self-Funding: _____ Dependents: _____

International students must submit updated financial documentation to Graduate School Admissions when changing or adding a program or degree level. If you will be receiving an assistantship or any other form of financial support, please attach supporting documentation (i.e., offer letter) to this form.

REQUEST TO CLOSE OR CHANGE FROM THE FOLLOWING DEGREE/PROGRAM:

CURRENT DEGREE: _____ CURRENT PROGRAM: _____

MASTERS ONLY – Indicate Thesis or Non-Thesis: _____ NADC (NON-DEGREE): _____

CAMPUS: Everett: _____ Global Campus: _____ Pullman: _____ Spokane: _____ Tri-Cities: _____ Vancouver: _____

REQUEST TO MOVE INTO THE FOLLOWING DEGREE/PROGRAM:

NEW DEGREE: _____ NEW PROGRAM: _____

MASTERS ONLY – Indicate Thesis or Non-Thesis: _____

CAMPUS: Everett: _____ Global Campus: _____ Pullman: _____ Spokane: _____ Tri-Cities: _____ Vancouver: _____

EFFECTIVE TERM: Fall: _____ Spring: _____ Summer: _____

STUDENT SIGNATURE: _____ DATE: _____

CURRENT DEPT./PROGRAM SIGNATURE: _____ DATE: _____

NEW DEPT./PROGRAM SIGNATURE: _____ DATE: _____

FOR GRADUATE SCHOOL USE ONLY:

GRADUATE SCHOOL APPROVAL: _____ DATE: _____

Current GPA: _____ Needs Reinstatement: Yes: _____ No: _____ Request Updated I-20: _____

Notify Student: _____ Notify Department: _____ Notified Programs: _____ Notified IP: _____