

## **Change of Program, Graduate and Professional Students**

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INNOVATION FOR A HEALTHIER PLANET

## CHANGE OF PROGRAM POLICY

- Change of Programs applies to graduate students requesting to change their current program to a different graduate program or certificate program at the same or the level below. (e.g., from the graduate level to the graduate level).
- Once the semester begins, any changes to a student's program will be effective for the subsequent semester. Changes to a student's program cannot be made for the same semester the student is in progress.
- Students requesting to change their program to one outside their current college must apply through Graduate Admissions.

## **STUDENT INFORMATION**

First Name:	Last Name:	PRN:
Email:	Expected Graduation D	ate: Campus:
SECTION I: CURRENT PROGR	AM	
Current Program:		College:
Level: 🗌 Graduate 🗌 Profess	sional 🗌 Doctorate Current Ad	dvisor/Support Specialist:
SECTION II: NEW PROGRAM		
New Program:		College:
Level: 🗌 Graduate 🗌 Profess	sional 🗌 Doctorate Effective	Term: Summer Fall Spring Year:
Updated Graduation Date:	New Advisor/St	upport Specialist:
SECTION III: STUDENT APPRO	<b>DVAL</b> (Font signature NOT accepted)	
I hereby announce my intent to cha published in the University Catalog.		ications, and agree to fulfill the new program's requirements, as
Student's Signature:	Тс	oday's Date:
CHANGE OF PROGRAM APPF	ROVAL (Font signature NOT accepted)	
Current Advisor/Support Special	st's Signature:	Today's Date:
New Program/Academic Director	's Signature:	Today's Date: