Change of Graduate Program Form Tel: 631.632.7050, option 1

Fax: 631.632.4992

E-mail: SPD@stonybrook.edu

School of Professional Development (SPD) Stony Brook University N-201 Social and Behavioral Sciences Stony Brook, NY 11794-4310

Please type or print carefully

Deadline:	Submit this completed form to SPD <u>before the fir</u> the New Degree Program. Forms received after the New Degree Program is a subject to the New Degree Program.	
Note:	This form can only be promulgated after admission to a new program or becoming a Non-matriculated Graduate Student (GSPNM). Changing your Graduate Program will result in the original program being discontinued without a degree being posted. If this is not your intention, please consult with your program director or the School of Professional Development. International students must have the permission of an International Student Advisor for this form to be processed and approved.	
Stony Brook (S	SB) ID #	Date
Name	Last First Mi	Phone
E-mail		
Are you a U.S.	citizen? Yes No If no, please indicate you	r Visa status:
	Signature of VIS	S Advisor:
Old Degree Pr	rogram – Please indicate whether online or traditional	Final Semester and Year of Degree Program
		Fall Spring Summer 20
New Degree Program – Please indicate whether online or traditional First Semester and Year of Degree Program		
		(Circle One) Fall Spring Summer 20
	y that the information I have submitted is complete and terms of this request.	accurate to the best of my knowledge, and that I
Signature of S	Student	Date
The following	section must be completed with the appropriate signature	res. STUDENT: DO NOT WRITE BELOW LINE.
Old Program A	Advisor Signature	Print Name Date
		Print Name Date
Old Program D	Pirector Signature	Print Name Date
New Program	Advisor Signature	Print Name Date
New Program	Director	
S	Signature	Print Name Date
	_ Approved & Processed	
	Dean, School of Profe	ssional Development (SPD) Date
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