PROGRAM CHANGE NOTICE
Submit completed form to Warner Registrar’s Office
246 LeChase Hall, R.C. Box 270425
Rochester, New York 14627-0425

Please Print or Type

PERSONAL INFORMATION
Name: ________________________________ ________________________________
Last First Middle
UR ID# (not SSN): ________________________________
Advisor: ________________________________

Home Address:
Street Address & Apt. No. or P.O. Box City State Zip Code

Phone Number(s): ( ) ( )
Home Phone Work Phone

E-mail Address: ________________________________

I, the above-named student, wish to change my program of study at the Warner School from:

Degree in ________________________________ to: ________________________________ in

Current Program Title in ________________________________ Department

Changed Program Title in ________________________________ Department

1) I understand that I cannot use this form to change from:
   • department to department (e.g., Educational Leadership to Teaching & Curriculum)
   • degree to degree (e.g., MAT to MS, EdD to PhD, etc.)
   • elementary to secondary or secondary to elementary education
   • discipline to discipline within Teaching & Curriculum (e.g., science to English)
   • any standard program to one with a specialty (human development to same program with BCBA)
   • any other program or degree to a counseling program

I also know that in order to make the changes bulleted above I must contact the Admissions Office, as these changes necessitate readmission or other application procedures.

Any questions about program changes should be directed to the Admissions Office.

2) I further understand that if I am receiving a tuition award from the Warner School, any change of program must be reviewed by Admissions, and while Warner will try to allow me to keep the tuition award, I am not guaranteed that I will retain any award granted for the original program at time of admission.

SIGNATURES
Student: ________________________________
Signature Date
Advisor: ________________________________
Signature Date
Program Chair: ________________________________
Signature Date
(only if necessary)
Associate Dean: ________________________________
Signature Date

Updated 03/2016