

CHANGE OF PROGRAM REQUEST

This form is to be filled out by the student requesting the Change of Program

Application date	ID#	International student
Semester when you want to start the new program		

Instructions to process this form:

- Fill out your personal information
- List your Current program
- List the Program you wish to change to
- Sign the form (you can do it electronically or print it)
- Send this form to your current advisor reporting your decision to change program and request his/her signature
- The advisor will send the form to graduate@andrews.edu

Please note submission of this form does not guarantee acceptance into the new program.

STUDENT'S PERSONAL INFORMATION

Last name	First name	Middle name	Previous surname(s)
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THE STUDENT IS CURRENTLY ACCEPTED IN THIS PROGRAM

College /School	Degree	Concentration
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THE STUDENT IS REQUESTING ACCEPTANCE INTO THIS PROGRAM

College /School	Degree	Concentration
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STUDENT SIGNATURE

Signature	Date
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CURRENT ADVISOR SIGNATURE & COMMENTS

Comments	
Signature	Date

Advisor: after you have signed this form, please send it to graduate@andrews.edu



Email form