APPLICATION FOR CHANGE OF DEGREE PROGRAM
(referred to as Plan in Cardinal Station)
(Graduate Students)

The graduate student who wishes to change degree programs in the School of Music must submit this completed form to Dr. Joseph Santo, after having (a) spoken with his/her present adviser, (b) spoken with the adviser of the program in which he/she wishes to major, and (c) obtained the required signatures. Before a student changes degree programs, he/she should be aware of the new requirements for graduation, which are outlined in the Graduate Announcements.

Student’s Name_____________________________________ EmplID________________________
Telephone______________________________________________Email__________________________

Student Status:  ___master’s      ___doctoral

1) STUDENT: I have discussed this change of degree program with both my present adviser and the adviser of the program in which I wish to major, and I request a change from _______________________to ____________________ , effective (Semester)_____of (Year)______.
(Please be sure to indicate designations such as MA, MM, DMA, PhD.)

___________________________       ____________________ __________________
Signature of Student      Date

2) PRESENT ADVISER: The student has discussed this change of degree program with me.
Comments:

___________________________ ____________________ __________________
Signature of Present Adviser Program  Date

3) NEW ADVISER: The student has discussed this change of degree program with me. He/she has passed the required audition*/submitted all necessary documentation**.
* Attach audition form signed by committee members.
** Attach confirmation that student has submitted documentation, e.g. writing samples.
Comments (including any changes in undergraduate prerequisites: please refer to the original letter of admission):

___________________________ ____________________ __________________
Signature of New Adviser  Program  Date

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APPROVALS

4) CHAIR OF DIVISION TO WHICH STUDENT WISHES TO TRANSFER:

___________________________ ____________________ __________________
Signature of New Division Chair       Program  Date
(if different from New Adviser)

5) ACADEMIC DEAN:

___________________________ Date
Signature of Academic Dean

INDEPENDENT STUDY