VIRGINIA TECH
GRADUATE SCHOOL
CHANGE OF GRADUATE PROGRAM

Last name _____ First _____ MI _____ Student Number _____

Address _____

Current Graduate Program _____ QCA _____ Today's Date _____ Effective TERM/YEAR _____

This application is to be forwarded to the Graduate School. Application for change in Graduate Program is due two weeks prior to registration (opscan) for the term change is to be effective. A change in Graduate Program is permanently processed into university records if an application submitted on this form is approved.

APPLICATION FOR CHANGE IN GRADUATE PROGRAM

I request to have my Graduate Program changed

from _____ (Graduate Program) in _____ (College) to _____ (Graduate Program) in _____ (College)

Degree _____

Doctor of Philosophy ☐
Doctor of Education ☐

Masters:
Regular ☐
Provisional ☐
Special ☐

APPROVED BY (Obtain signature for approval in order given):

1. Department Head for Old Graduate Program _____
2. Department Head for New Graduate Program _____
3. Dean, Graduate School _____
4. Declined signature _____

I authorize the Graduate School to change the information on this form as approved by my Department Head. I recognize that if I am not accepted into the new department, I will be dropped from the rolls of the Graduate School.

Student Signature _____