UNIVERSITY of MARYLAND EASTERN SHORE

DIVISION *of* ACADEMIC AFFAIRS

School of Graduate Studies

REQUEST FOR CHANGE OF DEGREE PROGRAM

(*To be used only by matriculated students, not applicants or graduated students*)

Student's Name: _____ Date: ____/___/____
Last First Middle

Student's ID#_____

Current Degree Program: _____

Requested Change of Degree Program: _____

I have read the procedures and respectfully request permission to change my degree program.

_____ Date: _____/_____/_____
Signature of Student (mandatory)

Approved By:

Accepted By:

_____ _____
Advisor Date ***Graduate Program Coordinator of new program*** Date

_____
Graduate Program Coordinator of current program Date

_____
Dean of Graduate School Date

Comments:

PROCEDURES: A new application form and statement of purpose form must be processed with this request. The incoming program to which the student wishes to change reviews the student's admissions materials and recommends or denies admission to the program. The program may request additional letters of recommendation, an updated UMES transcript, GRE scores (if required by the program) and other admissions requirements specific to the program. The Graduate Dean reviews the admission recommendation from the program and accepts it or rejects it. The student is notified in writing of any action on the admission.
Reference: Change of degree – level, program or status subsection of the Graduate Catalog.