



UNIVERSITY OF SOUTH ALABAMA

Petition for Change of Graduate Program

NAME (Please Print)

TO BE COMPLETED BY STUDENT

STUDENT NUMBER

			J00
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Last

First

Middle

Complete Parts I and II to declare or change Program*, Major*, Concentration(s).

PART I

I am currently enrolled in:

College _____

Program _____

Major _____

Attribute

(if applicable) _____

Concentration 1

(if applicable) _____

Concentration 2

(if applicable) _____

Student Signature _____

PART II

I wish to declare/change to: _____

Program _____

Major _____

Attribute

(if applicable) _____

Concentration 1

(if applicable) _____

Concentration 2

(if applicable) _____

Date _____

TO BE COMPLETED BY DEPARTMENTS

Department Chair Signature _____ Date _____

STUDENT ID J00 _____ Effective Term _____ Catalog Term _____

MAJOR CODES

COLLEGE	PROGRAM	MAJOR	ATTRIBUTE (if applicable)	CONCENTRATION 1 (if applicable)	CONCENTRATION 2 (if applicable)
_____	_____	_____	_____	_____	_____

PRIMARY ADVISOR _____ ADVISOR ID J00 _____

If this is a professional licensure program, check to see if the student is located in a state where the program does not meet the requirements for licensure. Visit <https://www.southalabama.edu/departments/institutionaleffectiveness/stateauthorizations.html> for more information.

Initials of reviewer: _____

***NOTE:** This form can only be used to change a program or major within the same college. If a student is changing programs from one college to another, a new application for admission must be completed. Students in Arts and Sciences changing programs from one department to another must complete a new application for admission.

REGISTRAR'S OFFICE USE

Updated By _____ Date _____ Degree Analyst _____ Date _____