

**SAN DIEGO STATE UNIVERSITY**  
**Division of Graduate Affairs**  
**SSE 1410 (619) 594-5213**  
**aztecgrad.sdsu.edu**

## Request to Change Degree/Major Objective between Departments

(TYPE OR PRINT CLEARLY)

	RED ID
Last <span style="float: right;">First Name</span>	Telephone No.
Street Address <span style="float: right;">Apt/#</span>	Email
City <span style="float: right;">State</span> <span style="float: right;">Zip Code</span>	

This is an official application to request a change of degree/major objective from a current department to another. A current graduate adviser's signature is required prior to submitting this request to the Division of Graduate Affairs.

### STUDENT INFORMATION

Applicants filing for a change of degree/major objective must meet the following conditions:

1. All departmental requirements must have been satisfied as stated in the Graduate Bulletin.
2. Graduate Record Examination (GRE) scores must be on file, or Graduate Management Test (GMAT) scores for Business applicants.
3. Official transcripts from each institution attended must be on file with the Office of Admissions and Records.

Current Degree (e.g., MA, MS, MBA)	Major (and concentration/specialization, if applicable)
I currently have Judicial Action against me	No <input type="checkbox"/> Yes <input type="checkbox"/>
Reason for transferring from current program: _____	

I certify the above information is complete and correct. I understand my SDSU file will be forwarded to the adviser of my new program of interest for review.

Student Signature	Date
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### TO BE FILLED OUT BY CURRENT GRADUATE ADVISER ONLY

This student is currently in good standing    Yes  No

Comments: \_\_\_\_\_

Current Graduate Adviser Signature	Department	Date
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# Request to Change Degree/Major Objective between Departments

<b>Name:</b>	<b>Red ID#</b>
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(TYPE OR PRINT CLEARLY)

**TO BE FILLED OUT BY NEW GRADUATE ADVISER :**

**New Degree/Major Objective** (Refer to Graduate Bulletin for authorized graduate degree)

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Degree (e.g., MA, MS, MBA)      Major (and concentration/specialization, if applicable)

- Admit Classified     
  Admit Conditionally     
  Deny

State reasons/conditions briefly: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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New Graduate Adviser Signature \_\_\_\_\_ Date \_\_\_\_\_

**DIVISION OF GRADUATE AFFAIRS**

- Admit Classified. Applicant must confer with graduate adviser regarding official program of study.  
 Admit Conditionally. Conditions stated above.  
 Deny. Applicant may contact graduate adviser for further information regarding denial to program.

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Effective Date      Graduate Dean/Designee Signature      Date