DEPARTMENT OF EDUCATIONAL PSYCHOLOGY

REQUEST FOR CHANGE OF DIVISION

Student: _____ UIN: _____

Degree objective (circle one): MA MS Ed.M. CAS Ph.D.

I request a change from _____ to
(current division)

_____ to take effect as of _____
(proposed division) (date)

The reason for the change is (be specific):

_____
(signature of student) (date)

Current Division Action:
We agree to release this student.

_____
(current advisor's signature) (date)

_____
(current division chair's signature) (date)

Proposed Division Action:
We agree to accept this student.

_____
(proposed advisor's signature) (date)

_____
(proposed division chair's signature) (date)

Rev. 6/09