

THE UNIVERSITY OF ALABAMA
DEPARTMENT OF BIOLOGICAL SCIENCES
CHANGE OF PROGRAM FORM

STUDENT NAME: _____

DATE: _____

EMAIL: _____

CWID: _____

*** NOTE: Student changing from M.S. to Ph.D. program will require a new graduate school application. Additional information on this process can be found in the handbook.

CHANGING PROGRAM CONFIRMATION:

Current program: M.A. M.S. plan ____ Ph.D.

Switching to: M.A. M.S. plan ____

CHAIR OF M.A. ADVISORY COMMITTEE:

Printed Name: _____ Signature: _____

GRADUATE PROGRAM DIRECTOR / DEPARTMENT CHAIR:

Printed Name: _____ Signature: _____