

Change of Program and/or Plan Application

Instructions

This form should be completed in conjunction with the student's current academic department. Students are strongly advised to consult with the new department prior to completing this form. Once the student application information is complete, this form should be submitted to the student's current department. Undergraduates applying to graduate programs must formally apply through Graduate Admissions. To be effective for a given term, Change of Program/Plan Applications must be submitted to the Registrar's Office during the Add/Drop period.

General Information	University ID Number: _____ Name _____ <div style="display: flex; justify-content: space-between; font-size: small;"> Last First Middle </div> <p style="font-size: x-small;">By signing this form, the student grants permission to the current academic department to send pertinent academic information to the requested new department in order to aid in the decision-making process.</p> Student Signature _____ Date _____
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Program Details	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Effective Term _____ CURRENT ACADEMIC DEPARTMENT Academic Program _____ Academic Plan - Major _____ Academic Sub-Plan 1 _____ Academic Sub-Plan 2 _____ <small>Used when this student has an option in a BS/MS</small> </div> <div style="width: 45%;"> Campus Change NEW ACADEMIC DEPARTMENT Academic Program _____ Academic Plan - Major _____ Academic Sub-Plan 1 _____ Academic Sub-Plan 2 _____ <small>Used when this student has an option in a BS/MS</small> Requirement Term _____ </div> </div> <p><input type="checkbox"/> Student is in the Honors Program. (If checked, Current Department should send a copy to the Honors Program Office.)</p> Current Dept. Print _____ Email _____@rit.edu Sign _____ Date _____
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Certification	<input type="checkbox"/> Certification Either the current or new department can indicate this is to be used for certification purposes. Please sign and fill out Checkout Term _____
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Application Decision and Signatures	APPLICATION DECISIONS AND SIGNATURES <input type="checkbox"/> Accept If accept, please complete all of the information below and return to the Registrar's Office. <div style="font-size: small;"> Has a re-evaluation of transfer credit been completed? <input type="checkbox"/> Yes <input type="checkbox"/> Pending <input type="checkbox"/> No change If yes, please complete and attach the appropriate Credit Articulation forms. </div> <input type="checkbox"/> Reject If reject, please sign below and complete the following steps: <ol style="list-style-type: none"> make a copy of the signed application and return the copy and department folder back to the student's current academic department and, send the original, signed application to the Registrar's Office New Department: Print _____ Email _____@rit.edu Sign _____ Date _____
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Registrar's Office Use Only	<p style="font-size: small;"><i>Student has existing minor(s)/concentration/immersion, added to new program/plan</i></p> <p style="font-size: small;"><i>Student record includes DUAL-CN for current program/plan</i></p> <p style="font-size: small;"><i>DUAL-CN applicable in new program/plan and added</i></p> <p>Date Processed _____ Processed By _____</p>
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