



Knowledge that will change your world

UAB Graduate School
Attn: Marla Jones
LHL G03; 1720 2nd Ave S
Birmingham, AL 35294-0013
mcjones@uab.edu

CHANGE OF GRADUATE PROGRAM

All required signatures (student, current program director, and new program director) must be included on this form.

STUDENT INFORMATION

Student Name: Blazer ID:
Student ID (B#): Email Address:

PROGRAM INFORMATION

My current program is: circle one: Master's/Ed.S. Doctoral Certificate
My desired program is: circle one: Master's/Ed.S. Doctoral Certificate
I would like this change to take place as of (circle one): Spring Summer Fall Year:

Student's Signature Date

CURRENT PROGRAM DIRECTOR

By signing below, I am indicating that I understand this student's intent to withdraw from this graduate program. Signing below does not necessarily indicate endorsement of the student's academic performance.

Current Program Director's Signature Date

NEW PROGRAM DIRECTOR

By signing below, I hereby approve this request.

Select one: Regular Admission Contingent Admission (*contingencies must be included below)

*Notes:

New Program Director's Signature Date

Graduate School Use Only:

Approval of Graduate School Date