

Curriculum/Program Change Form

This form should only be completed if you are an enrolled graduate student and have been in your current program for a semester or more with grades.

Note:

- There is a non-refundable \$75 processing fee if you are changing departments.
- Checks or Money Orders of \$75 should be made out to: Brooklyn College.
- If you are submitting a check, please remember to sign only the front and date the check.
- If you are submitting a check and the only name on the check is someone other than the applicant's, please enter the applicant's name in the memo section of the check.
- If you are submitting a money order, please enter the applicant's name on the bottom of the money order.
- If your original application was filed less than 2 years ago, your original application will be used for the review process <u>unless you are required to submit new supporting materials</u>.

Personal Ir	nformation		
	Date of Birth:		
M.I:	Last Name:		
(State)		(Zip Code)	
	(Mobile)		
New Program	New 3 Digit Code	Effective Semester	Effective Yea
	M.I: (State)	M.I: Last Name: (State) ome) (Mobile)	Date of Birth:(MM/DD/YY) M.I: Last Name:

I hereby certify that all the information given in this form is accurate and complete. I understand that all the information contained in this form will be treated confidentially and will be used for institutional purposes only. I realize that failure to provide complete and accurate information may affect my admission. I understand that my application will not be considered until the Office of Admissions receives all the necessary documents. In addition, I understand that previous acceptance to one program does not guarantee acceptance to a new program.

Student's Signature

Date

