

Office of Admissions 222 West Quad Phone: 718.951.4536

Email: grads@brooklyn.cuny.edu

STATUS CHANGE FORM

| You are a: Matriculated graduate student applying for non-degree status Provisional or non-degree graduate student applying for matriculation status (Students changing to matriculated status may be required to submit additional documents to satisfy program requirement NOTE: If your original application was filed more than 2 years ago, you may be required to complete a new application and submall documents, including official transcripts, letters of recommendation; etc. | | | |
|---|--|---|-----------------------------|
| | | New document(s) submitted with this form: | |
| | | Application fee (\$125) | Resume |
| | | Official College Academic Transcript(s) | Letter of Recommendation #1 |
| L.A.S.T. | Letter of Recommendation #2 | | |
| Essay | Other: | | |
| Pers | sonal Information | | |
| Emplid #: | Female: Male: | | |
| First Name: | Middle Initial: | | |
| Last Name: | Date of Birth: | | |
| | (MM/DD/YY) | | |
| Mailing Address: | | | |
| City | State Zip Code | | |
| Telephone: | | | |
| Home Number | Mobile Number | | |
| Email Address: | | | |
| | | | |
| | | | |
| Program Co | de Effective Semester & Year | | |
| be treated confidentially and will be used for institutional purp | curate and complete. I understand that all the information contained in this form will loses only. I realize that failure to provide complete and accurate information may be considered until the Office of Admissions receives all the necessary documents. am does not guarantee acceptance to a new program. | | |
| Student's signature | Date | | |