

Change of Graduate Classification

UO ID Last Nar		ne First Name			
UO Email		Major	•		
Current Degree Leve	l (check one): M	lasters			is the current degree?
Type of Change Requ	ested: 1	. Remo	val of Condit	ional Status	
	2	. Chang	ge from Docto	oral to Masters	(within the same program)
	3	. Chan	ge from Degro	ee + Certificate	to Certificate Only
Current Classification:	Proposed	Classifica	ation:	If Master's	which degree? ${e.g., MA, MS, MBA, etc.}$
Student Signature(Must be hand-drawn or confirmation					Date:
Action By School or I	Department:		Approved	Denied	
Change of Graduate Classif	ication to:		Effec	tive Term:	
Printed Name:	/Department Head/Director of C	Graduate Stu	ndies		
Signature:					Date:
					which you want to make a change.
					s a written justification is attached
If you are <u>indicating a term</u> request (Use a separate sheet		a future te	erm, you will need	l to submit a writte	n justification for backdating your
If you are denying this requ	est, please explain why b	y submitti	ng a written state	ment (Use a separa	ite sheet).
Division of Graduate	Studies Decision:		Approved	Denied	
Change From:	To: _				Effective Term:
Note to Registrar: Please	remove/update degree co	ode in Ba	nner as appropr	iate.	
Signature:					Date:
Vice Provos	t or Designee				

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