

THE COLLEGE OF NEW JERSEY
Graduate Change of Program Form

Name: Last	First	MI	Social Security #:																																																																																																														
Local Address:			Telephone #:																																																																																																														
E-Mail Address:			Approximate # Transfer Credits:																																																																																																														
Present Program:			Code:																																																																																																														
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Degree Program:	Certification and College Cert. Non-Degree Programs:	Overseas Programs:																																																																																																															
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STUDENTS: FIRST, you must obtain the signature of the graduate coordinator of the *new* program department, **THEN** the signature of the graduate coordinator from the department you are leaving. Once you have *all* necessary signatures, return this form to The Office of Records and Registration (Green Hall 112).

NEW DEPARTMENT GRADUATE COORDINATOR SIGNATURE

DATE

PREVIOUS DEPARTMENT GRADUATE COORDINATOR SIGNATURE

DATE