



# Change of Level or Program Request Form

## PART I: TO BE COMPLETED BY THE STUDENT

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
 Student ID#: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 U.S. Street Address: \_\_\_\_\_ Apartment #: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Current Immigration Status:  F-1  J-1 SEVIS ID: N \_\_\_\_\_  
 Current I-20/DS-2019 Expiration Date: \_\_\_\_\_ Do you have any dependents?  Yes  No

## PART II: TO BE COMPLETED BY THE ACADEMIC ADVISOR

**Student's Current or Previous Degree Level** (Complete the one that applies)

- The student is expected to complete their current  Bachelor's  Master's degree at the end of:  
 \_\_\_\_\_  
 term year
- The student completed his or her previous  Bachelor's  Master's  Doctorate degree at the end of:  
 \_\_\_\_\_  
 term year

**Student's New Degree Level or Degree Program** (Complete the one that applies)

- The student is changing his/her educational level **from:**  Bachelor  Master **to**  Master  Doctorate  
 \_\_\_\_\_  
 New Major Anticipated Start Date
- The student is changing his/her major from \_\_\_\_\_  
 to \_\_\_\_\_  
 The student's new expected date of completion is: \_\_\_\_/\_\_\_\_/\_\_\_\_
- The student is beginning a sequential  Bachelor's  Master's degree  
 \_\_\_\_\_  
 New Major Anticipated Start Date

## Academic Advisor Information

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**To submit your request:** email a scanned attachment of this completed form to [intlservices@webster.edu](mailto:intlservices@webster.edu).  
 Your subject line should be: "Change Program (or Change Level) Request, Last Name, First Name, Webster ID #"  
 Your request will be processed and you will be notified within 5-7 business days.