



WILLIAM & MARY

Graduate Arts & Sciences

Change of Status Form

Use this form to make any changes to your status as a graduate student in A&S (e.g., from full-time to part-time status; from a doctoral program to a terminal master's program). This form is only to be used for status changes made within the same graduate program, not for instances in which the student will transfer from one A&S graduate program to another.

Instructions

Signature required before returning the form:

- Student;
- Director of Graduate Studies in the student's graduate program.

Deadline: ongoing, but by the last day of classes for the semester.

If you are in a Ph.D. student who wishes to receive an M.A. or M.S. degree while continuing in your current doctoral program, please check the box "M.A. or M.S. degree conferral request for continuing doctoral student." This will allow our office to update your record so you may apply for your M.A. or M.S. degree.



WILLIAM & MARY
Graduate Arts & Sciences

OFFICE OF GRADUATE STUDIES
Blow Memorial Hall (Suite 326), 262 Richmond Road
757-221-1966 | dean-gsr@wm.edu

Change of Status

Student's Name: R. Griffin Banner ID #: 939999999

Student's Dept/Program: Ph.D. in AMST

Type of Status Change (please check one):

- From non-degree seeking to regular graduate From part-time to full-time
 From full-time to part-time M.A. to M.S. M.S. to M.A. M.S./Ph.D. to M.S.
 M.A./Ph.D. to M.A. Ph.D. to M.S. Ph.D. to M.A. M.S. to M.S./Ph.D. M.A. to M.A./Ph.D.
 M.A. or M.S. degree conferral request for continuing doctoral student
 Other (describe): _____

Reason(s) for Change of Status (if applicable):

- Financial resources not adequate Conflict with employment Uncertainty of objectives
 Continuing on with Ph.D. program. This request is for M.A. or M.S. degree conferral.
 Dissatisfaction with academic progress Family or other personal concerns
 Other (please describe): _____

Student Signature _____

Date _____

The Department/Program has indicated below whether or not courses should be counted toward the degree of (choose one):

- M.A. M.S. M.P.P. Ph.D. **Please upload spreadsheet/document using attachment option for additional courses if necessary**

Course CRN#	Dept. or Program	No. & Section	Semester Year Taken	Grade	Credits	Credit Toward Degree? YES No

Director of Graduate Studies: Print Name | Signature _____

Date _____

Investment in student: \$ _____	Effective Date for Change of Status: _____
Vice Dean for Research and Graduate Studies Signature _____	Date _____
Graduate Registrar _____	