



UO ID _____ Last Name _____ First Name _____

UO Email _____ Major _____

Current Degree Level (check one): Masters Doctoral

- Type of Change Requested:
1. Removal of Conditional Status
 2. Change from Doctoral to Masters
 3. Classification Change from Doctoral/Masters to Certificate

Current Classification: _____ Proposed Classification: _____

Student Signature _____ Date: _____
(Required ONLY for options 2 and 3)

Action By School or Department: Approved Denied

Change of Graduate Classification to: _____ Effective Term: _____

Printed Name: _____
Dean/Department Head/Director of Graduate Studies

Signature: _____ Date: _____

This form must be filed in the Graduate School no later than week 5 of any term in which you want to make a change. Forms submitted after week 5 will automatically be considered for the next academic term unless a written justification is attached (Use a separate sheet).

If you are indicating a term other than the current or a future term, you will need to submit a written justification for backdating your request (Use a separate sheet).

If you are denying this request, please explain why by submitting a written statement (Use a separate sheet).

Graduate School Decision: Approved Denied

Change From: _____ To: _____ Effective Term: _____

Signature: _____ Date: _____
Dean or Designee