

CHANGE OF ACADEMIC LEVEL GRADUATE

In order to be eligible for a change of academic level you must be in good academic standing (3.0 cumulative grade point average and meet satisfactory academic progress).

Name: _____ Student ID#: _____
 Address: _____ Email: _____
 _____ Phone: _____
 _____ Last Semester Enrolled at CCS _____

Graduate Programs:

<u>Change from:</u> Current Graduate Program	<u>Change to:</u> Proposed Program	<u>Name of Programs (current & proposed):</u>
MA	MA	From: _____
MFA	MFA	To: _____
_____	BFA	_____

Student Signature: _____ **Date:** _____

Graduate Chair Signature: _____ **Date:** _____

Graduate Advisor Signature: _____ **Date:** _____

Undergraduate Department Chair Signature: _____ **Date:** _____

Transfer Credit Evaluation must accompany this form.

Transfer Credit Evaluated by Advisor Yes No
 Transfer Credit: Evaluated by Department: Yes No

Distributed to:

- Financial Aid
- International Student Services

Completed by AARO:

Processed: _____ Date: _____
 Changed Mentor Changed Advisor

Notes:

Return completed form to:

Registrar
 Academic Advising & Registration Office
 College for Creative Studies
 201 East Kirby Street, Detroit, MI 48202
 Phone: (313) 664-7672