

THE UNIVERSITY OF  
**SCRANTON**  
A JESUIT UNIVERSITY

COLLEGE OF GRADUATE AND  
CONTINUING EDUCATION

**GRADUATE PROGRAM CHANGE**

**STUDENT NAME**

\_\_\_\_\_

**STUDENT ID #**

\_\_\_\_\_

**DATE**

\_\_\_\_\_

**PRESENT PROGRAM**

\_\_\_\_\_

**NEW PROGRAM**

\_\_\_\_\_

**STUDENT**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

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**PRESENT PROGRAM**

**Mentor**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**Program Director**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**NEW PROGRAM**

**Mentor**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**Program Director**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**Dean**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

The student should secure approvals of the Graduate Mentor and Program Director of the present program and proposed new program before presenting this form for review by the College of Graduate and Continuing Education Office of Student Services and Advising.