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www.wpi.edu/Admin/Registrar/

Office of the Registrar

GRADUATE MAJOR/DEGREE CHANGE FORM

Instructions: Please fill out this form and obtain appropriate signatures and return to the Office of the Registrar

Name: _____ Student ID: _____
Please Print

Major: _____ Email: _____ Date: _____

Students Signature: _____

Major change

Current Major: _____ New Major: _____

Signature for new major: _____

Approve: _____ Deny: _____

Signature: _____
Department Head or Graduate Coordinator Signature

NOTE: Copy of this form is sent to Graduate Admissions for release of file to new major department

Degree change

Current degree: _____ New Degree: _____
Ph.D. MS

Approve: _____ Deny: _____

Signature: _____
Department Head or Graduate Coordinator Signature

Part-time/Full-time Change

Current Status

New Status

Part-time _____ Full-time _____ Part-time _____ Full-time _____

Approve: _____ Deny: _____

Signature: _____
Department Head or Graduate Coordinator Signature

cc: Dept.
Grad Admissions