GEORGIAN COURT UNIVERSITY
THE MERCY UNIVERSITY OF NEW JERSEY

Academic_____
Transcript _____
Staff _____
Date _____

Revised: July 2014

OFFICE OF THE REGISTRAR

Graduate
Change/Addition of Matriculating Program

This form is only valid for programs within the same academic department.

Name: _____ GCU Student ID # 000__ - _____

Current Program: _____ Current track (if applicable) _____
Masters degree and/or GCU certificate program

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Complete this section if you wish to: add/drop GCU certificate or concentration, change your current track or remove degree.

___***Add to current program:*** _____ ___***Delete from current program:*** _____

___***Change track to:*** _____

___***Remove masters and change program to GCU certificate only:*** _____

X _____ _____
Program Director Approval **Date**

OR

Complete this section if you wish to change from one masters program to another masters program within the **same** academic department.

___*Change Program to*:

___ M.A. Education: Special Education ___ M.A. Education: Teacher Student w/ Disabilities ___ M.A. Education: School Counselor

___ M.A. Education: Autism Spectrum Disorders ___ M.A. Education: ESL ___ M.A. Education: Inclusive Education

___ M.A. Education: Reading Specialist ___ M. A. Administration & Leadership

___ M.A. Education: Education Teacher ____M.A. Education: Learning Disabilities Teacher Consultant
Choose one certification: __dual P3 __dual P3 w/ TSWD __dual El EdK6 w/ TSWD __dual El EdK6 +6-8 Subject Spec w/ TSWD

__dual K12 subject specific w/ TSWD

___ M.B.A. ____ Traditional ___ Accelerated

Approval from Director of New Program: **X**_____ _____
Program Director Date

X _____ _____
Student Signature **Date**