

Description and Instructions

Student Status Change Agreement

Description

The form is completed when a student wishes to change status from undergraduate to graduate or from graduate to undergraduate. Some courses in the post baccalaureate teacher education program are required for graduate level students only. When the student is required to take these courses, he or she must request a change in status in order to register for the class.

Instructions

1. When a student requests a change of status, he or she must apply and be admitted to the program (graduate or post baccalaureate undergraduate) he or she is changing to.
2. The student may request only one change of status per semester.
3. The student should not enroll in classes for a semester in which status will change from graduate to undergraduate, or undergraduate to graduate until after this form has been submitted the status has been changed in PAWS. In order to be processed in a timely manner, the form must be submitted to your academic advisor two weeks prior to registration for the semester being changed.
4. The student completes the following fields: Last Name, First Name, Middle, Campus ID, Type of Change requested, Semester, Name of Academic Advisor, Student Signature, and Signature Date. Student signature assures that the student understands of the impact of the change on financial aid.
5. The completed form is forwarded to the student's Academic Advisor. The Advisor signs the form indicating the change is appropriate and acceptable.
6. The advisor retains a copy of the form in the student's permanent file and forwards the form to the appropriate office for processing.

Student Status Change Agreement

Submit form at least two weeks prior to registration for the semester you are requesting the change.

YOUR NAME AS IT APPEARS ON UWM RECORDS:	Last Name	First Name	Middle	Campus ID
Type of Change Requested:	<input type="checkbox"/> Graduate to Undergraduate <input type="checkbox"/> Undergraduate to Graduate	Indicate semester and year status change is requested for: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer Year _____ <small>Note: Any future changes require you to submit an updated form.</small>		
Name of Academic Advisor:				

FORM MUST BE SIGNED AND DATED BELOW IN ORDER TO BE VALID

I agree to change my status as indicated above. I have consulted with the Financial Aid department and understand my financial aid could be affected. Tuition will also be adjusted. I further understand that if by virtue of my change in status I no longer meet enrollment prerequisites/ restrictions in any classes in which I am already enrolled I will be dropped from those classes.

Student Signature:

Date:

For office use only:

Advising Review:

Check Applications in PAWS:

Graduate Career: Academic Program _____ Admit Term _____

Undergraduate Career: Academic Program _____ Admit Term _____

Student notified if re-entry or other action is needed Not applicable

Transcript text entered

Advisor Signature: _____ Forwarded on Date: _____

For Graduate School or Department of Enrollment Services

DISC row added (___ GRAD; ___ UGRD)

Initials _____ Date: _____

MATR'd as a (___ GRAD; ___ UGRD)

Initials _____ Date: _____

Original: Undergraduate to Graduate Change: Graduate School
 Graduate to Undergraduate Change: Department of Enrollment Services
 Copy: Student File in SOE