



School of Graduate Studies

Office of the Dean · School of Graduate Studies
25 Bishop Place · New Brunswick · New Jersey 08901-1181
p. 848/932-7034 · f. 732/932-7407

ADDITION OF SECOND DEGREE PROGRAM

- Complete and submit this form to Program Director for signature.
- Application should then be forwarded to **prospective** Program Director for signature.
- Upon approval, this form must be returned to the School of Graduate Studies Office of the dean for evaluation.

STEP 1: TO BE COMPLETED BY THE STUDENT:

Name _____ RUID# _____

Street _____

City _____ State _____ Zip _____

Telephone _____ Email _____

Citizenship: U.S. _____ U.S. Perm. Res. _____ Foreign _____

Date of enrollment in the School of Graduate Studies _____

Current Program and degree status _____

Desired Second Program and degree status _____

Desired term effective: Fall _____ Spring _____ Summer _____ **Year** _____
(Check off a **semester** and write in the **year**)

Please explain why you are applying for this program change:

STEP 2 : TO BE COMPLETED BY CURRENT PROGRAM DIRECTOR:

I have reviewed this request. I *recommend* _____ *do not recommend* _____ the addition of a second degree program for the reasons indicated below.

Current Director

Date

STEP 3: TO BE COMPLETED BY PROSPECTIVE PROGRAM DIRECTOR:

The candidate *is* _____ *is not* _____ acceptable to the graduate program in _____ as a prospective candidate for the _____ degree. The reasons for *acceptance* or *non-acceptance* are indicated below.

Prospective Director

Date

STEP 4: TO BE COMPLETED BY THE CENTER FOR GLOBAL SERVICES:

International Students must provide financial documentation to submit for review to the Center for Global Services, 180 College Avenue, CAC. The endorsement must be obtained *after* submitting to program director.

Signature (International Student Advisor)

Date

STEP 5: TO BE COMPLETED BY THE SCHOOL OF GRADUATE STUDIES:

Conditions for this approval: _____

School 16 Class _____ Curriculum _____ Degree _____

Approved _____ Not Approved _____ Effective: Fall _____ Spring _____ Summer _____ Year _____

Dean's Signature

Date