Change of Program Form
Simon Graduate School of Business, University of Rochester
Registrar’s Office, 305 Schlegel Hall

Directions:
- Complete this form if a student is changing programs.
- Scholarship information (if applicable) must be completed by Admissions.
- Return the completed form to the Registrar’s Office. This form will become part of the student’s permanent record.

Student Name: ___________________________________  Today’s Date: ________________
Please print Last First MI Mo. Day Year
Student signature: _______________________________  UID#: __________________

Change of Program

Effective Date: ________________
Mo. Day Year
Effective Quarter for New Program: ________________

Current Program
- MBA Master of Business Administration
- MS in Business Administration
- MS in Finance
- MS in Accountancy
- MS in Management
- PT MSB Med Man
- PT MSB Med Man 2 year program
- Part-time Flexible MBA
- Accelerated Professional MBA (PMBA)
- PhD

New Program:
- MBA Master of Business Administration
- MS in Business Administration
- MS in Finance
- MS in Accountancy
- MS in Management
- PT MSB Med Man
- PT MSB Med Man 2 year program
- Part-time Flexible MBA
- Accelerated Professional MBA (PMBA)
- PhD

Current Concentrations: ____________________  New Concentrations: ____________________

Does this change of program reflect completion of current program and acceptance into new program?
(For example: MS to MBA) __________________________
- Yes  - No

Change to Scholarship  _______yes _______no Not applicable if completing MS and starting MBA as student will show up on
NEW student list sent by the Admissions Office with new scholarship amount.

Distribution of Scholarship (if applicable) for remainder of academic year:
- fall  - winter  - spring  - summer

Approval Signature
________________________________________________________________________
Admissions Department  Date

Registrar’s Office Only

Copies of form sent to:
- Bursar  - Student file  Date received: ______________
- Financial Aid  - International Services Office ISO  Date processed: ______________
- Career Center CMC  - University Health Service  Processed by: ______________
- Simon IT Dept.

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