

**PAUL SMITH'S COLLEGE**  
**REGISTRAR'S OFFICE**  
**PROGRAM CHANGE FORM**

Please use this form to Change Degree Program

<b>Student's Name:</b>
<b>Date of Entry into Paul Smith's College:</b>
<b>Current Program:</b>
<b>New Program:</b>

**\*For those students changing to Integrative Studies program ONLY, please check the appropriate boxes and indicate your topic selections.**

<input type="checkbox"/> BS	<input type="checkbox"/> 2-TOPIC	<b>TOPICS:</b>	
<input type="checkbox"/> BA	<input type="checkbox"/> 3-TOPIC	1.	_____
<input type="checkbox"/> AS		2.	_____
<input type="checkbox"/> AA		3.	_____

Please indicate if student is changing advisors for this new program

<b>Old Advisor:</b>	<b>New Advisor:</b>
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<b>Dept Chair's Signature of Current Program:</b>		<b>Date:</b>
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<b>Dept Chair's Signature of New Program:</b>		<b>Date:</b>
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<b>Student's Signature</b>		<b>Date:</b>
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*All previous courses taken by the student will be applied to new program GPA.*

<b>ANY PROGRAM CHANGE COMPLETED AFTER THE END OF THE ADD PERIOD OF ANY SEMESTER WILL BE EFFECTIVE FOR THE NEXT SEMESTER, NOT THE CURRENT SEMESTER.</b>
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